



A Princess For A Day



A Family For Every child
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 Springfield, OR 97477
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 Info@afamilyforeverychild.org
www.afamilyforeverychild.org

Donation Form

DONATED BY: (Print name as it should appear in the program)				
Contact Name, Address, City/St/Zip, Phone, Email:				
Description of Items or Service:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Est. Retail Value</td> </tr> <tr> <td style="padding: 5px;">Expiration Date</td> </tr> <tr> <td style="padding: 5px;">Tangible Item or Gift Certificate</td> </tr> </table>	Est. Retail Value	Expiration Date	Tangible Item or Gift Certificate
Est. Retail Value				
Expiration Date				
Tangible Item or Gift Certificate				
Donor Signature	Date			
AFFEC Representative Signature	Date			

Thank you for your support

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