Name of organization	Employer identification number
A FAMILY FOR EVERY CHILD	20 4151057

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	L S & CO. SSCCIT 3125 CHAD DR EUGENE, OR. 97408	$ 5000.	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
8	OBIE FAMILY FOUNDATION 205 E 6TH AVE #500 EUGENE, OR. 97401	$ 10000.	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
9	THE HERBERT A. TEMPLETON FOUNDATION 0650 SW GAINS STREET #1102 PORTLAND, OR. 97239	$ 7000.	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
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		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)