



\_\_\_\_\_ TEACHER'S NAME\_

ENVELOPES WILL BE COLLECTED EVERY WEDNESDAY & RETURNED TO STUDENTS ON FRIDAY.

LAST DAY TO TURN IN DONATIONS: WEDNESDAY, MAY 2ND

STUDENT'S LAST NAME\_

*Vertical Runnei* 

STUDENT'S FIRST NAME \_\_\_\_\_

**TOTAL DONATIONS** 

GRADE\_

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GRADE	TEACHER'S NAME		
	COLLECTED <b>EVERY WED</b> TO STUDENTS ON FRIDA  DNATIONS: <b>WEDNESDA</b>	AY.	Vertical Runn
DONOR'S NAME	CASH OR CHECK DONATION	COMPANY MATCH	TOTAL DONATION
TOTAL DONATIONS	\$	\$	\$

**CASH OR** COMPANY **TOTAL DONOR'S NAME CHECK DONATION** MATCH **DONATION** 

Please make checks payable to: Parkview PTO

**DOUBLE YOUR DONATIONS!** Ask sponsors if they work for a matching gift company and ask for their company form to include in this envelope. Parkview PTO is a 501(c)(3) organization and donations are tax deductible. If you'd like a receipt for your donation, please email us at ParkviewPTO@gmail.com.

FOR OFFICE USE ONLY:							
APRIL 4	APRIL 11	APRIL 18	APRIL 25	MAY 2			

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APRIL 4\_\_\_\_\_ APRIL 11\_\_\_\_ APRIL 18\_\_\_\_ APRIL 25\_\_\_\_ MAY 2\_\_

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