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Potential Donor Name Company Street Address City, State, Zip

Dear			

The (name of organization) is proud to support our students and honor the hard work they do. We invite you to support your local community by making a donation. We depend on the generosity of the surrounding community to provide the best opportunities for our children in light of drastic cuts to education budgets.

All donations are tax-deductible to the extent allowed by law. (Name of organization) is exempt from federal taxes under section 501(c)(3) of the Internal Revenue Code as a member of Parent Booster USA's (PBUSA) group exemption #5271. In accordance with IRS rules and regulations, donors are advised to verify an organization's 501(c)(3) tax exempt status. Copies of our current PBUSA membership certificate, PBUSA's IRS Group Exemption Letter, and current IRS Affirmation Letter are available upon request.

Only with your help can we continue to provide th	e level of support our students need and deserve.
Thank you for considering a donation to this very	worthy cause. For questions or further information,
please contact	<u>.</u>

Sincerely,

Name of contact person Name of organization

> Please send gift certificates, monetary donations, and correspondence to: Name and address of contact person

> > (Name of Organization) EIN#: XX-XXXXXXX

[Name of Organization] [EIN xx-xxxxxxx]

Cash/In-Kind Donation Form

Yes! We want to help the (name of organization).

Date: ______

Cash Donation: \$_____

In-Kind Donation: Please describe your donation (including fair market value):

Please PRINT clearly and list your name(s) as you would like to be recognized on (website, program, handout, etc.):

Company/Organization Name: _______

Contact Name(s): _______

Phone: _______Email: _______

Address: _______

Contact information is needed to send a tax receipt for donations. If you do not receive a response from us within 30 days, please e-mail (contact person within your organization) so we can verify that your donation has been received.

Please mail this form to:

(Name and address of contact person)

Thank you for your support!

Name of organization Address City, State, Zip