

CAMPBELL ELEMENTARY PTA DIRECT CONTRIBUTION FORM

YOUR INFORMATION:

Your Name:	
Address:	
City:	
Zip Code:	
Home Phone #:	
Alternate Phone #:	
Email Address:	

STUDENT(S) INFORMATION:

Name:	Grade:	Teacher:

VOLUNTARY DIRECT CONTRIBUTION:

Amount enclosed: \$_____.

Please make your check payable to "Campbell PTA".

Remember your contribution is tax deductible!

For a written receipt, please contact our PTA Treasurer, Jill Paquette, at treasurer@campbellpta.org

Accounting Information (PTA Use Only)

Contribution Amount:	
Date:	
Check Received #:	
Cash Received:	

**THANK YOU FOR YOUR SUPPORT OF BESS CAMPBELL ELEMENTARY
YOUR CONTRIBUTION IS VERY MUCH APPRECIATED**