

# Deposit Form



Local Program or Area Name \_\_\_\_\_

Your Name \_\_\_\_\_ Date \_\_\_\_\_

Your Contact Info: Phone \_\_\_\_\_ Email \_\_\_\_\_

**Please total the funds being deposited:**

**Total Donations**                      \$ \_\_\_\_\_                      **Total Fundraising**                      \$ \_\_\_\_\_

**Please tell us any additional information you have about these funds:**

*Examples include: We had a bake sale. These are memorial donations in honor of Jane Doe. We had a bowl-a-thon.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Donors to Thank

We will thank all donors that have provided contact information (through their check or accompanying information). Please provide any additional information that should be included in the thank you letter.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide any additional names of donors that should be thanked.

Name \_\_\_\_\_ Amount \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Amount \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Amount \_\_\_\_\_

Address \_\_\_\_\_

- Please mail checks and money orders. Do not mail cash.
- All Deposit Forms should be mailed or emailed to SONH, [SpecialOlympics@sonh.org](mailto:SpecialOlympics@sonh.org)