



5K Run/Walk ~ Oct. 5, 2019
Pledge / Donation Collection Form
www.s2scnj.org

QUESTIONS?
 Please contact the S2S office
 at 732-246-8300

Your Name: _____ Team Name _____ Email Address: _____ Phone Number: _____ Street Address: _____ City, State, Zip: _____	Instructions: <u>PLEASE PRINT—Use 2 Lines if needed</u> 1. Complete ALL donor information fields 2. If the donor does not have an Email — write in a Phone # 3. Place all checks/MOs collected in an envelope and staple to this form. Drop off or mail envelope to address listed below. 4. Any cash collected can be dropped off at the Sisters House or converted to a cashier's check or money order — stapled to this form and then placed in an envelope for mailing or drop off. 5. “Thank You” letters will be sent for donations of \$50 or more.
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Donor's Name	Email Address	Complete Mailing Address (<u>for \$50 or More</u>)	Check Amt & Check #	Cash Amt - (Cashier's Ck/MO)
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
You can mail or turn in this Pledge/Donation Collection Form and funds to: S2S 5K — 1201 Hamilton Street—Somerset, NJ 08873			\$ _____ Total	\$ _____ Total