



BIKE RACK DONATION FORM

NAME: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

RACK PLACEMENT ADDRESS: _____

DEDICATED TO (IF A FULL \$160 DONATION IS RECEIVED):

WORDING ON PLAQUE IF OTHER THEN BUSINESS NAME:

For office use only

Amount paid: _____

Date received: _____

Received by: _____

This letter will serve as your **RECEIPT FOR TAX PURPOSES**. Your contribution is tax deductible to the extent allowed by law. No goods or services were provided in exchange for your generous donation.