



BACK-TO-SCHOOL DRIVE

Drop-Off Form

PLEASE COMPLETE & BRING THIS FORM when dropping off backpacks. **PLEASE PRINT CLEARLY.**

This information is how we log your company's donation. If we cannot read it, we cannot log it.

Contact Name _____

Contact Email _____

Drive Leader Company/Organization Name _____

Total # of **FILLED** Backpacks _____ ___ Donated extra school supplies (Check if YES)

Total # of **EMPTY** Backpacks _____

Thank you!



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