



Name: _____

Date: _____

Organization/Group: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

100% of your donation
directly impacts a child's life!

I/We will provide backpacks for:

- 1 child \$13.00
- 5 children \$65.00
- 10 children \$130.00
- Classroom (20 children) \$260.00
- Grade level (80 children) \$1,040.00
- School (350 children) \$4,550.00
- Other \$ _____

Mail donation to:

Community Foundation of St. Clair County
516 McMorran Blvd.
Port Huron, MI 48060

Make checks payable to *Community Foundation of St. Clair County* with *Back to School* in the memo line.

Credit card donations can be made on our website:
stclairfoundation.org