City of
St. Paul Park
600 Portland Avenue
St. Paul Park MN 55071
(651) 459-9785

Receipt of Charitable Non-Cash Donation

Date: ___________________________

DONOR:

Name: ____________________________________________________________

Address: __________________________________________________________

Phone: ____________________________________________________________

ITEM:

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VALUED AT: $ ____________

SPECIFIC PURPOSE (Optional): __________________________________________
(ex: Summer Rec. Program, Volunteer Appreciation Dinner, National Night Out, etc.)

DONATION RECEIVED BY:

________________________________________________ Date __________________________
Signature of Authorized Representative of the City of St. Paul Park

Return form to: City Clerk 4/25/15