



Fundraising Form Instructions

- Complete the form and return to your campaign leader along with a money order or cashier's check made payable to *Combined Fund Drive*
- Expenses can be reimbursed by submitting original receipts with this form to your campaign leader. Expenses cannot be deducted directly from the proceeds of the fundraiser.

Name:
Agency/Division:
Mail Stop:
Phone/Email:
Name of Fundraiser:
Date:

Fundraiser Income v. Expense

Total Income	\$
Less Fundraiser Expenses	-\$
Net Fundraiser Income	\$

Donation Information

Charity Name	Charity Code	Amount
CFD General Fund	0316854	\$
		\$
		\$
		\$
		\$
	Total (Should match total amount of money order)	\$

For Campaign Leader Use Only

Date received _____

Received by _____

Event ID _____

Combined Fund Drive ♦ PO Box 40250 ♦ Olympia, WA 98504-0250
www.cfd.wa.gov