

**ABVM School Donation  
Form 2025-2026**

Name of the Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

List Items Donated and Attach the Receipt:

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**\*\*\* Receipts ARE Required for Donations \*\*\***

Hours given for purchased items will be credited at \$35 = 1 hour