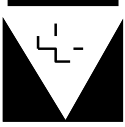


LATAH COUNTY SCHOOL SUPPLY DRIVE:

2016 Application Form:



NAME (parent/guardian): _____

ADDRESS: _____

City State Zip Code

PHONE: work: _____ home: _____

CHILDREN' NAME(S) / GENDER	GRADE (Fall '16)	SCHOOL
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SCHOOL SUPPLY ITEMS REQUESTED (Please Attach Classroom Supply List)

Signature of Parent or Guardian

Signature of School Official _____ **Telephone**
(REQUIRED)

This is a volunteer project and donations received will be distributed on a first-come basis. All donations received will be sorted and packaged per requests. Fulfillment of requests is subject to amount/type of item(s) donated.

Please Return to:

Debi Dockins, Director Volunteer Services – debi.dockins@gritman.org
Kristopher Alina, Office Manager, Volunteer Services – kristopher.alina@gritman.org
Gritman Medical Center
700 S. Main, Moscow, Idaho 83843
208.883.6369 FAX

REMEMBER TO PICK UP YOUR SUPPLIES!

Supplies will be distributed at Gritman Medical Center's Volunteer Services Office (2nd floor, north wing) on **Friday, August 19, 2015 from 1:00-5:00 p.m.**