

DONATION RECEIPT

Date: _____



FRANKLIN COUNTY
QUILTERS GUILD

Deborah Dusablon,
FCQG Treasurer
117 Green Point Road
North Hero, VT 05474

DONOR	
Name	_____
Address	_____
City/State/Zip	_____
Phone	_____

ITEM	QUANTITY	DESCRIPTION
CASH	AMOUNT	CHECK NUMBER

X _____
Received By

Name: _____
Office Held: _____

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