OOLTEWAH YOUTH ASSOCIATION CONTRIBUTION RECORD

TEAM _____

COACH _____

SPORT _____

DATE	CONTRIBUTORS NAME	ADDRESS	FEDERAL ID # OR BUSINESS LICENSE #	AMOUNT DONATED

THE SOLE PURPOSE OF THIS FORM IS TO MAINTAIN ACCURATE RECORDS OF CONTRIBUTIONS RECEIVED BY THIS ENTITY (OOLTEWAH YOUTH ASSOCIATION) IN ACCORDANCE WITH FEDERAL REGULATIONS GOVERNING TAX EXEMPT ORGANIZATIONS.