

DAY OF CARING 2011

Jackson County United Way

Tuesday May 10, 2011

Project Request Form

Please return this form to Jackson County United Way no later than March 14, 2011.

You will be notified if your project is selected.

Agency Name: _____

Project Contact Person: _____

Project Contact's Phone: _____ Cell/ Day of Event Phone: _____

Project Contact Person's Email: _____

Project Address: _____

Assumed # of volunteers needed to complete project: _____

Description of project:

Materials needed:

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