

DEPOSIT REQUEST

Date: Group Name:		
Submitted by:		Phone:
Email:		
Address:		
Memberships	\$	For Our General Fund
Donations	\$	For Our General Fund
Donations	\$	For
Grant	\$	From/for
TOTAL TO BE DEPOSITED Number of checks	\$	
Notes, special instructions, comments:		

Checks must be made out to Berkeley Partners for Parks (BPFP).

Note the group's name in the memo line, and/or make it clear in "notes" above.

Mail this form, the original checks, and one copy of both form and checks to BPFP at the address above.

Keep another set of copies for your records.

To receive confirmation of your deposit:

- _ I have enclosed a stamped, self-addressed envelope
- Please email me.

Questions? Contact Lily Hill at books@bpfp.org .