

\*First Name

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\*Last Name

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\*Street

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\*City

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\*State

\*ZIP

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\*Email

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\*Phone

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\* Required Information



**Thank you for making a  
donation through this  
Direct Giving Campaign.  
Your generosity is greatly  
appreciated.**

### Type of Donation?

Personal     Business

In honor of \_\_\_\_\_

In memory of \_\_\_\_\_

All gifts are tax deductible.

Taxpayer ID #04-6001300

National Center for Education Statistics (NCES) District ID # 2510770

Does your employer provide matching funds? Let them know you've donated.

### Amount

\$1000     \$500     \$250     \$100

\$50     \$25     \$10     \$5     Other \$ \_\_\_\_\_

### Payment

Personal check # \_\_\_\_\_  Business check # \_\_\_\_\_

**Please make check payable to Shrewsbury Public Schools and include "Colonial Fund" in the memo line.**

Mail completed form and check to:

Shrewsbury Public Schools

Attn: Colonial Fund

100 Maple Avenue

Shrewsbury, MA 01545.

**Please note: Donors may be listed in publicity documents. Please indicate if you wish to remain anonymous.**

Please keep my donation anonymous \_\_\_\_\_