



To Honor And Notice Kindness & Service

Please send a certificate to _____ in appreciation for her/his act of kindness or service. (Recipient's name)

Recipient: District 54 staff member Community Member District 54 parent
 Retiree Business Volunteer

Recipient's Street Address (or school if applicable): _____
City: _____ State: _____ Zip Code: _____

Please explain act of kindness or service.

Enclosed is my gift of \$ _____

Donor's Name: _____ Phone# _____

Base School (if applicable): _____

Donor's Street Address: _____

City: _____ State: _____ Zip Code: _____

Please make your tax deductible check payable and mail to:

*Schaumburg Township Elementary School Foundation
524 E. Schaumburg Road
Schaumburg, IL 60194*

Charge to my credit card:

MasterCard Visa

Cardholder (please print): _____

Signature _____

Card number: _____ Exp. Date _____

Security Code _____