



2017 Polar Plunge Donation Tracking Form

Name : _____

Team Name : _____

Plunge Location : _____

Donor's Name	Address	City	State	ZIP	Phone Number	Amount	Check(CK) or Cash(CA)	Paid v
Jack Frost	605 E. Willow St.	Normal	IL	61761	800-394-0562	\$50	CA	√
Offline Subtotal	\$	Return this form, with all collected donations, at your Plunge event registration. Please make all checks payable to Special Olympics Illinois. <i>*Offline donors of \$100 or more will receive a mailed receipt from Special Olympics Illinois.</i> You may use Plunge donor receipts for cash or check donations less than \$100.						
Total Raised Online	\$							
Grand Total Raised	\$							