

BOARD OF CHILD CARE AUXILIARY

KEY PERSON REMITTANCE TO BOARD OF CHILD CARE

Revised 2018-05-10

DATE _____

Enclosed please find \$ _____ to cover the following:

Donations \$ _____

In order to send an acknowledgment to the donor, please include the following information. Additional sheets may be used.

Donor's Name: _____

Address: _____

Donor's Email Address: _____

Church or Organization: _____

Please do not mail cash. Send this form and a check to: Board of Child Care
3300 Gaither Road
Baltimore, MD 21244-2999

The check should be made payable to: Board of Child Care.

Do you need donation envelopes? _____ How many? _____

Key Person _____

Home Address _____

Church/Organization _____

.

—

—