



LINENS & GIFTS REPORTING FORM

THIS FORM SHOULD BE COMPLETED AND SUBMITTED WITH EACH DONATION.

2009-2010 Fiscal Year

CIRCLE NAME: _____

REPORTING PERSON _____ PHONE _____

MONTH/YEAR _____

Note: List the number of Items in each Category

LINEN ITEMS

ITEM	QUANTITY
Bears	
Neonatal Caps	
Neonatal Booties	
Look-a-like Dolls	
Tooth Fairy Pillows	
Blankets	
Other _____	

GIFTS

ITEM	QUANTITY
Batteries	
Books & Magazines	
Children's Toys	
Crayons & Markers	
Playing Cards	
Other _____	