

CANISTER REPORTING FORM

MONTH MONEY COLLECTED:_____

CIRCLE:

EPORTING PERSON:		PHONE:	
AL COLLECTED (shou	ld equal amount of en	closed check): \$	
ne & website. Also, with a newly issued NSFER ansferring a canister	include name and canister number f	phone of Circle member serv or future reporting.	d space to include business address ricing canister. KD office will get bac to include the name of the former C ister.
Canister No. (issued by KD office)	Amount Collected	Name of Business	Concerns with Canister*

(*i.e., THEFT, CHANGE IN LOCATION, MERCHANT UPSET, OR SPECIAL STORIES WE CAN SHARE WITH THE COMMUNITY)

Submit completed form to:

The King's Daughters | 601 Children's Lane, 2nd floor | Norfolk, VA 23507 Tel: 757.668.7098 | Fax: 757.668.8907 | Email: info@kingsdaughters.org