




RECEIPT		NO. 1.
Payee Name: _____ Address: _____ City, ST ZIP Code: _____		Paid to: Reno Guardian Angels P.O. Box 12581 Reno, NV 89510 501(c)(3) #11-2592739
DATE	DESCRIPTION	AMOUNT
 RENO, NEVADA	Reno Guardian Angels 2008 Blanket-Bundle Drive	\$
	SUBTOTAL	\$
	TAX	N/A
	TOTAL	\$

RECEIPT		NO. 2.
Payee Name: _____ Address: _____ City, ST ZIP Code: _____		Paid to: Reno Guardian Angels P.O. Box 12581 Reno, NV 89510 501(c)(3) #11-2592739
DATE	DESCRIPTION	AMOUNT
 RENO, NEVADA	Reno Guardian Angels 2008 Blanket-Bundle Drive	\$
	SUBTOTAL	\$
	TAX	N/A
	TOTAL	\$

RECEIPT		NO. 3.
Payee Name: _____ Address: _____ City, ST ZIP Code: _____		Paid to: Reno Guardian Angels P.O. Box 12581 Reno, NV 89510 501(c)(3) #11-2592739
DATE	DESCRIPTION	AMOUNT
 RENO, NEVADA	Reno Guardian Angels 2008 Blanket-Bundle Drive	\$
	SUBTOTAL	\$
	TAX	N/A
	TOTAL	\$