

SVIOA DONATION FORM

Sacramento Valley Intergroup of Overeaters Anonymous (SVIOA)
 PO Box 25-5085
 Sacramento, CA 95865

Date: _____ Donation Amount: \$_____

Donation From: 7th Tradition _____ Event _____

Meeting Information: Number _____ City _____ Day _____ Time _____

Sent By: Name _____ Phone Number _____

Donations

Use the tables below to report donations and income from events.

If cash is enclosed, name of 2nd person verifying cash amount: _____

Checks	
Payer	Amount
Subtotal Checks	\$.

Cash		
Denomination	Number	\$ Amount
\$20.00		
\$10.00		
\$5.00		
\$1.00		
\$0.25		
\$0.10		
\$0.05		
\$0.01		
Subtotal Cash		\$.

Subtotal Checks	\$.
Subtotal Cash	\$.
Total (Checks + Cash)	\$.

Email: otreasurer@sacvalleyoa.org

This form is available on the SVIOA website: www.sacvalleyoa.org