



Fundraising Activity Form

Organization's Name:	
Contact Person's Name:	
Contact Person's Phone:	
Contact Person's Email:	
Amount of Gift Cards to be Purchased & Wholesale Value:	at \$
Type of Gift Cards Sold:	Tunnel Touchless

Office Use Only:

MAS Approval Signatures:	
Amount of Wash Cards Sold/Cost	
Check amount & Number	
Cost of Cards to organization:	