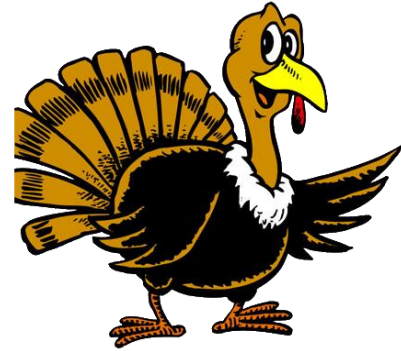


Safe Voices
2015 Feed-A-Family Donor
Participation Form



Date: _____

Donor Contact: _____

Donor Company: _____

Phone Number: _____

Donor E-Mail: _____

Donor Fax #: _____

Donor Address: _____

Number of families you would like to provide for: _____
___ small family (1-4) ___ large family (5+) ___ no preference

Notes: _____

**If you wish to participate in our Feed-a-Family program for 2015, please
complete and return this form to Steve by October 13.**

You may return the form by mail, fax, or email:

Safe Voices, P.O. Box 713, Auburn, ME 04212-0713

fax: 207-795-6814

e-mail: smoore@safevoices.org

Thank you for your continued support!