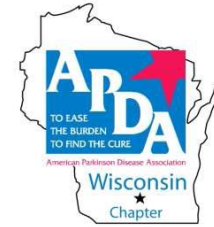




# Parkinson's Half Marathon, 5K, 1 Mile Walk

## Donation Collection Sheet



Date of Collection	Name	Address	City/State/Zip	Phone Number	Indicate if donation is online	Donation Amount
<b>TOTAL</b>						