

# Treats & Sweets Day Donation Deposit Form

Baker Name \_\_\_\_\_ Team Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Number of checks enclosed \_\_\_\_\_ Total amount enclosed \_\_\_\_\_

DO NOT MAIL CASH. Please convert to check or money order.

All checks must be made payable to **Pet Partners**.

**Please complete form and mail with checks to:**

**Pet Partners - TSD**  
**345 118<sup>TH</sup> Ave SE, Ste 100**  
**Bellevue, WA 98005**

