

# Annual Human Race - Funds Transmittal Form

**This form must accompany each Human Race deposit turned into the volunteer center.** This document is "the record" of each organization's pledge collection. If you have any questions regarding this form, please contact the Volunteer Center at 408-247-1128 x327.

Mail Check Deposits to: **The Volunteer Center of Silicon Valley**  
**ATTN: Human Race**  
**1922 The Alameda, Suite 100**  
**San Jose, CA 95126**

Deposits may be dropped-off in person, 10:00 a.m. - 5:00 p.m. Monday - Friday only. Early and late drop-offs will be accepted by appointment ONLY. Please call two business days in advance to schedule a special drop-off appointment.

**Please Remember:**

- Make all checks payable to: "HUMAN RACE-VOLUNTEER CENTER".
- Organizations **MUST** write the name of the pledge collector and benefiting organization on each check they submit.
- Checks can be written instead of mailing cash.
- **PRINT** or **TYPE** all information clearly.
- Retain a copy of this form for your records.

Date of deposit: \_\_\_\_\_ Name of Person/Org Making deposit: \_\_\_\_\_ Have you made a prior deposit? YES / NO

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Nonprofit organization receiving this donation: \_\_\_\_\_

**(MUST BE COMPLETE)**

Mailing Address of nonprofit receiving donation: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

<u>Name of Walker/Runner</u>	<u>Address</u>	<u>Phone #</u>	<u>Deposit Amount Today</u>	<u>Check #</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

Are you a challenge participant (circle)? YES / NO Confirmed By (Initials): \_\_\_\_\_ Total Amount: \_\_\_\_\_ # of Checks (Circle): 1 - 2 - 3 - 4 - 5

For Volunteer Center Use ONLY

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ CA Tot.: \_\_\_\_\_ CK Tot.: \_\_\_\_\_