



# STUDENT

# AMBASSADORS

## EVENT DONATION TRACKING FORM

### Event Information

First Name:

Last Name:

School Name:

**Event ID:**

**Please list total event funds raised: \$** \_\_\_\_\_

### Mailing Instructions

Please make sure all checks are made payable to Wounded Warrior Project. Please be sure to mail your event funds to:

Wounded Warrior Project  
P.O. Box 758517  
Topeka, Kansas 66675-8517  
**ATTN: Student Ambassadors**

All checks should be mailed together in one envelope. **Please include the Event ID.** In the event that a check is mailed separate from the group, the **Event ID** should be listed on the check and envelope in order for that check to be included with the overall total.

WWP will provide a tax-deductible acknowledgement for all donations made directly to WWP. These letters will be sent to the address located on the individual check. Donors should expect to receive their tax acknowledgements within 4 – 6 weeks.

***If this form does not accompany the donations from your event or if accurate information is not provided we cannot guarantee that funds will be accurately totaled for your event.***