



CHOKLO BANK FORM FOR INSTITUTIONS

I received from Rizos de Amor y Alegría, A.C. the quantity of _____ Choklo Banks to collect money on my behalf in the following institution: _____

I agree to return the "Choklo Change" box by the date: _____, in the same condition in which it was given to me. The box will be returned to _____ in the following location: _____.

I also agree to send at least 3 pictures to the Rizos de Amor y Alegría A.C. Facebook page which show the use of the Choklo Bank for fundraising by the following date: _____

Name: _____

E-mail address: _____

Cell number: _____

Home phone number: _____

Office phone number: _____

Signature: _____

Date Choklo Bank is received: _____ Given by: _____

Attached is a copy of the recipient's ID (driver's license etc.) and a 10 dollar deposit has been made to the Rizos account prior to receiving the bank.

For Rizos de Amor y Alegría A.C.'s use only:

Choke Bank return date: _____

Name of the recipient: _____

Signature: _____

Amount collected: _____