Hilltop Regional Kitchen Donation Form

☐ Yes! I/We would My/Our gift to the I	like to donate to the Hilltop Reg Ritchen will be:	ional Kitchen.	
□ Up to \$499	- Friend of the Kitchen		
□ \$5 00- \$999	- Bronze Donor		
□ \$1,000 - \$2,4	199- Silver Donor		
□ \$2,500 - \$4,	999- Gold Donor		
☐ Over \$5,00	0- Platinum Donor		
My/Our tax-deduct	ible donation is enclosed in the a	mount of \$	
My/Our donation is	: □ In Memory of:		
	☐ In Honor of:		
Person(s)/Company: _			
Phone: ()	Email:		
Address:	City:	State:	Zip:
Signature:		Date:	
	wish to have my/our name publicly re acknowledged (the amount will not be		itions are
Make you	r check payable to Hilltop Region	nal Kitchen and mo	ıil to:

Hilltop Regional Kitchen
P.O. Box 172
131 Park Ave NW

Eagle Bend, MN 56446