



**Clemmons**  
**FOOD PANTRY**  
*Feeding Hope*

*Thank you for your donation. Please fill out the information and mail with your check to:*

*Clemmons Food Pantry  
PO Box 871  
Clemmons, NC 27012*

Donor Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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

Email address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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This donation is:  In honor of  in memory of:

Name: \_\_\_\_\_

Please send an acknowledgement of the gift to:

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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

*Thank you for your donation. Your gift will help us to feed the hungry in our community.*