



Supplies Schools Need, Inc

Wish list for the 2017/2018 school year

- | | | | |
|-----|-------|----------|-------|
| 1. | _____ | Quantity | _____ |
| 2. | _____ | Quantity | _____ |
| 3. | _____ | Quantity | _____ |
| 4. | _____ | Quantity | _____ |
| 5. | _____ | Quantity | _____ |
| 6. | _____ | Quantity | _____ |
| 7. | _____ | Quantity | _____ |
| 8. | _____ | Quantity | _____ |
| 9. | _____ | Quantity | _____ |
| 10. | _____ | Quantity | _____ |

Please provide the following information below:

Your School Name _____

Principal's Name _____

Your Name _____

Your Position _____

School's Tax Id# _____

School Address _____

School Phone # _____

Email _____

Please submit to: **supplischoolsneed@gmail.com**