


Name of Event: _____

 50/50 COPA Collection APWU & AUXILIARY					Date
Name	Last 4 EIN	Address	City & State	Zip	Amount ck or cash
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					

Collected by: _____

Local /State _____
 Total this page\$ _____