

PERSONALIZED LETTERS 'FROM' SANTA \$ 5.00 each

To benefit Children's Medical Center

Letters will be mailed approx. Dec 15 unless requested earlier

Please Print Clearly

* Contact Person Name: _____

* Phone # Home () _____ - _____ Work () _____ - _____

Name of child _____

First

Last

Age _____ Male ___ Female ___

Street Address _____ Apt # _____

City _____ State _____ Zip _____

Brothers: _____

Sisters: _____

Pet(s) : _____

Accomplishment this year (school, sports, music, potty training, any activity)

Gift(s)

Desired: _____

Gifts opened on _____ Christmas Morning _____ Christmas Eve _____ other (explain)

Mail **checks** (payable to SFOT) and **forms** to:

Anita Dunaway - TWIG 17
3741 St. Andrews Dr
Fairborn, OH 45324

I must receive form & check by December 1, 2008