

Shoe Drive Completion Form

Our Troop: _____ (Number, Level, School)

Number of girls participating: _____ Date: _____

Pairs of shoes collected: _____ Approximate number of hours (total) collecting shoes: _____

Leader Name: _____

Address: _____

Phone: _____ Email: _____

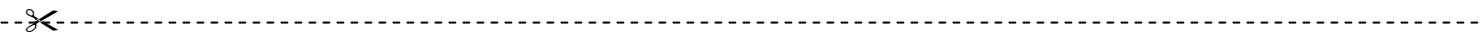
Mail this form with the shoes to: My New Red Shoes, 111 Anza Blvd. Suite 110, Burlingame, CA 94010



my new red shoes



Making the World a Better Place



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