

North Clackamas Family Support Center 6031 SE King Road Milwaukie, OR 97222 Phone: 503-353-5663

Fax: 503-353-5664

Information on Holiday Boxes 2019:

and available on the morning of December 21st. completes an application and turns it in by the deadline. Food/toy boxes will be delivered by volunteers By completing this application, you are requesting a holiday food box from a local community group. how to get it. To avoid confusion and possibly not receiving a box, we highly recommend being home on Saturday, December 21st, 2019. Deliveries start around 8 AM on the morning of the 21st. You must They are available "first come first served," but we hope to have enough supplies for everyone who be home to receive your box. If you are not home, a note will be left at your home with directions on

Thank you!

Iiday Food Box Sort EoRM PER ADDRESS Image: Sort Date2019 Image: Sort Date2018 <th>(continue listing household members on back) YOU MUST BE HOME TO RECEIVE YOUR BOX</th> <th>ouseholds on a first-cc</th> <th>APPLICATION DEADLINE: December 4 2019 Holiday h</th> <th>Οī</th> <th></th> <th>4</th> <th>ω</th> <th></th> <th>N</th> <th></th> <th></th> <th>ADULT PERSON APPLYING</th> <th>LAST NAME FIRST NAME</th> <th></th> <th>LIST INFORMATION FOR ALL INDIVIDUALS AT THIS ADDRESS</th> <th></th> <th>(multiple requests may result in non-service)</th> <th>telephone numbe ()</th> <th>street address</th> <th>2019 Request for Holiday Food Box INCOMPLETE OR DUPLICATE REQUESTS MAY NOT BE PROCESSED - ONE FOR Applying through: NC12 Wichita Family Support Date - Applying through: NC12 Wichita Family Support Date - PLEASE PRINT CLEARLY Return by December 4th Compassion in Action of Clackamas County/Toy & Joy Clackamas County (CiACC) and the affil games/gifts for children (when available) to the low-income, elderly, handicapped residents of C</th>	(continue listing household members on back) YOU MUST BE HOME TO RECEIVE YOUR BOX	ouseholds on a first-cc	APPLICATION DEADLINE: December 4 2019 Holiday h	Οī		4	ω		N			ADULT PERSON APPLYING	LAST NAME FIRST NAME		LIST INFORMATION FOR ALL INDIVIDUALS AT THIS ADDRESS		(multiple requests may result in non-service)	telephone numbe ()	street address	2019 Request for Holiday Food Box INCOMPLETE OR DUPLICATE REQUESTS MAY NOT BE PROCESSED - ONE FOR Applying through: NC12 Wichita Family Support Date - Applying through: NC12 Wichita Family Support Date - PLEASE PRINT CLEARLY Return by December 4th Compassion in Action of Clackamas County/Toy & Joy Clackamas County (CiACC) and the affil games/gifts for children (when available) to the low-income, elderly, handicapped residents of C
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Applicant Signature (REQUIRED) Agency: MILWAUKIE LIONS AND PORTLAND/MILWAUKIE E REMEMBER TO BE HOME ON DECEMBER 21ST.	By my signature below, I agree expenses arising out of the use on product availability and first partners, Adopt-A-Family and c through any other church or <u>COMPLETE CONTACT DATA</u>	Compassion in Action of Clack 503-632-0562 revised 10-10	Comments/Requests:		10	O	00	7	6	LAST NAME
	By my signature below, I agree to hold CiACC, its officers, directors, agents, donors, and volunteer workers harmless of all liability, losses, damages, costs, or expenses arising out of the use of these donations. I further understand that <u>completion of this form does not g</u> uarantee a holiday food box. This is determined on product availability and first-come first-served basis. CiACC may share the information provided herein and any images obtained with the clearinghouse partners, Adopt-A-Family and other such agencies for the holiday giving program for marketing materials. I hereby certify that I have <u>NOT</u> applied through any other church or agency for similar services this Christmas. I UNDERSTAND THAT I AM RESPONSIBLE FOR <u>COMPLETE CONTACT DATA AND NOTIFYING CIACC OF ANY CHANGES WHICH WILL BE USED FOR DELIVERY PURPOSES</u> .	Compassion in Action of Clackamas County - Holiday Box Program 503-632-0562 revised 10-10 (Phone numb								FIRST NAME
2019 Date Tom Hammond 503-593-8859		ogram PO Box 197 Oregon <u>ciacc(</u> (Phone number courtesy of Beavercreek Telephone)		F	- Z	R R R	- - -		г 2	SEX AGE
	teer workers harmless of all liability, losses, damages, <u>form does not g</u> uarantee a holiday food box. This is d ided herein and any images obtained with the clearing materials. I hereby certify that I have <u>NOT</u> applied D THAT I AM RESPONSIBLE FOR <u>E USED FOR DELIVERY PURPOSES.</u>	Oregon City, Or. 97045 <u>ciacc@comcast.nct</u> me)								Birth Date month/day/yr
	eer workers harmless of all liability, losses, damages, costs, or <u>form does not g</u> uarantee a holiday food box. This is determined ided herein and any images obtained with the clearinghouse materials. I hereby certify that I have <u>NOT</u> applied D THAT I AM RESPONSIBLE FOR <u>E USED FOR DELIVERY PURPOSES.</u>									Children 14 and under toy request