



FOOD DRIVE REGISTRATION

Company/Group Name: _____

Contact Name: _____

Street Address: _____

City: _____ **Zip:** _____

Phone: _____ **Fax:** _____

Email: _____

Food Drive Information

Start Date: _____ **End Date:** _____

Location: _____

Donations must be dropped off by Friday, November 20th.

Please drop off donations at our downtown location:

3429 Dr. Martin Luther King Jr. Blvd., Fort Myers, FL 33916

Monday-Friday, 8:00am - 11:00am

Donation forms available for tax purposes upon request.

**For more information or to submit this form, please email:
Thanksgiving@CommunityCooperative.com**