



Fundraising Service Hour Buyout

Date: _____

Parent Name: _____

Buyout # of Hours (1-20): _____

Amount Due (# hours X \$40): _____

Payment Options:

_____ Check made payable to GRACE and sent to SJB Office

_____ Cash delivered in person to SJB Office

_____ Credit Card payment in person at SJB Office

Payment Received by: _____