VISITOR INDUSTRY CHARITY WALK 2027

DEPOSIT ENVELOPE

Organization: _____

Fundraiser Team: _____

Team Captain
Name & Number _____

Deposit Details

Cash **(**See Below):** $ _____

Checks **(**See Below):** $ _____

Grand Total: $ _____

Deposit Drop Off:

Please carefully review the drop off instructions included in your welcome packet. For your convenience, drop-off locations now include First Hawaiian Bank branches in Lahaina and Kihei, in addition to the MHLA Office (85 N. Church St., Wailuku). **Bank and office drop-off procedures differ based upon drop off location.**

****PLEASE NOTE:** Multiple quantities of checks and cash bills are NO LONGER accepted. Please advise donors to make checks payable to *your* organization as ALL FUNDRAISING DONATIONS MUST BE COMBINED INTO ONE TOTAL CHECK made payable to *MAUI CHARITY WALK.* Mahalo!**

For Office Use Only

Actual Cash: _____ Deposit ID: _____

Actual Check: _____ Verified by: _____

Actual Amount: _____ Discrepancy Amt: _____

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