

PLEASE RETURN FORM TO BREAD COORDINATOR

# Bread Glean Participation

Renton Community Co-Op  
P.O. Box 3174  
Renton, WA 98056

Date: \_\_\_\_\_ Drivers: \_\_\_\_\_

Number of Participants: \_\_\_\_\_

**Instructions: Print your name next to the next available number, AND cross your name off the participation listed printed in the box at the bottom of the form. Take your share of bread up to the posted maximum for each category.**

1.	11.
2.	12.
3.	13.
4.	14.
5.	15.
6.	16.
7.	17.
8.	18.
9.	19.
10.	20.

Participants:
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