e•Scrap Nebraska
Shocking Facts. Smart Ideas. Brighter Future.
a program of WasteCap Nebraska

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SUMMARY OF CASH MATCH AND IN-KIND DONATIONS

Invoice # or Date	Vendor	Description of Services	Budget Category	Invoice Amount
			Participant Fees*	
			TOTAL:	

*Be sure to include participant fees collected in your match.

Program/Organization./Business Name: _____

Date and Location of Collection Event: _____