

Letter for  
**STUDENT**  
*Kids Alive International*

STUDENT'S NAME

STUDENT'S ID

DONOR'S FIRST NAME

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*Kids Alive International*

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Letter for  
**STUDENT**

*Kids Alive International*

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If you choose to use this form when corresponding, we encourage you to make additional copies for future use.

After writing your letter, please return this entire form (do not cut the page apart) to **Kids Alive International, 2555 Northwinds Pkwy, Ste. 1300, PO BOX 528, Alpharetta GA 30009-0528**