

DONOR FORM FOR GIFTS IN KIND

Organization Name:	' 		
Contact/Donor Nam	e:		
Address:			
City:			
State:	Zip Code:	Phone Number: _	
E-Mail Address:			
Do you wish to rece	ive an acknowledg	ement letter? Yes	_ No
become the property of the donor.* In turn its discretion. (*IRS regulations pro- advised that special I	of Veterans Outreac , Veterans Outreach hibit the Veterans Ou RS rules apply to gift	ch Center, Inc, and that val Center, Inc., may use, ke	ising donated material. Be ver \$5,000.)
			(Please use back as necessary)
GIFT CARDS:		Quantity:	Amount \$:
Donor Signature:			Date:
Staff Member Accept	ing Donation:		

Please submit to the Advancement Department