

IN KIND DONATION FORM

Date of Donation: _____

Donation is from: Individual Business/Corporation Business/Corporation Employees Other

Donor Information

Name

Address

City *State* *Zip*

Phone *Email*

Donations (check all that apply):

<input type="checkbox"/> Household Items	<input type="checkbox"/> Toys	<input type="checkbox"/> Food
<input type="checkbox"/> Toiletries	<input type="checkbox"/> Gift Cards	<input type="checkbox"/> Clothing
<input type="checkbox"/> Other (Specify): _____		

Donor's Assessment of Dollar Value: _____

Donor's Signature: _____

To be completed by YWCA Staff

YWCA Signature _____

Notes
(if applicable) _____

The YWCA Pierce County is a 501(c)(3) non-profit agency. All contributions are tax deductible to the extent allowed by law. Thank you for supporting the YWCA Pierce County!