

## **In-Kind Donation Form**

Thank you for supporting the young women at Our Friends Place! Please fill out this donation form so we can issue a tax receipt acknowledgement.

Date	
Donor Name (please list exactly how it should appear in promo materials)	
Contact Name & Title (if different than above)	
Mailing Address	City, State, Zip Code
E-mail	
Phone Number	
Website	
Facebook	
Instagram	
LinkedIn	
DESCRIPTION OF ITEM(S)	
	Fair Market Value (FMV):
	<u>\$</u>
	\$
	\$
	Total FMV: <u>\$</u>
Any Restrictions?	
I want my gift to be anonymous	

Please return this completed form to:

www.ourfriendsplace.org