



DONATION DATE: _____ RECEIVED BY: _____

DONATION FORM

DONOR INFORMATION

Individual: _____

OR

Corporation/Organization (if applicable): _____

Contact Name: _____

Address: _____ City: _____ State/Zip: _____

Daytime Phone: _____ E-mail: _____

Recognition (please describe preferences in listing and public acknowledgement of gift)

Name as it should appear in print (if different from above) _____

I do not wish to be publicly acknowledged

IN-KIND DONATION *(Please list total # of items donated _____)*

Please describe: _____

Estimated Fair Market Value (as determined by donor): \$ _____

Your generous contribution will help to further the important work of our organization. In-kind donated items or services valued over \$100 are acknowledged in writing by ACH. If your gift is valued at less than \$100, please retain this form as your receipt.

ACH Employee: _____ Date: _____

MONETARY DONATION *(Use this section for cash/check/credit card donations)*

(\$ _____) Cash Credit Card Check

Name on Card _____

Credit Card # _____ Exp Date _____ Sec Code _____

Signature: _____ Date: _____

GIFT CARD DONATION *(Please list total value of all gift cards _____)*

_____ (____) _____	_____ (____) _____
Type of Card (i.e. Target) Qty Value per card	Type of Card (i.e. Target) Qty Value per card

_____ (____) _____	_____ (____) _____
Type of Card (i.e. Target) Qty Value per card	Type of Card (i.e. Target) Qty Value per card