

Gift-A-Family Item/In-Kind Donation Form

FAMILY ID	

Please note that all required fields marked with a * must be completed for Families First to properly acknowledge your donation and provide a receipt for your tax purposes.

* Date:		□ Individual Donor	☐ Corporate Donor	
* Name:				
Company/C	Organization Affiliation (if applicable)_			
* Address:				
* City, State:	:	* ZIP:_	* ZIP:	
* Email:				
*Phone:				
* Donation A	Amount/Value: \$			
* <u>ITEMS DON</u> Please itemiz	NATED ze. If multiple of one item provided, you	ı may combine (10, Women's Clo	othing, \$150 for example)	
Quantity	Item		Market Value	
Quantity	item		Warner value	
	Thank	ks for your generous gift!		
Red	ceived by (Families First Staff)	*	Donor Signature	
All	contributions are tax deductible as allowable Please include form with your o	e by law. The IRS requires that donor donation or email it to giftafamily@		
		For Office Use		
	Received by Database Manager	Entered into Database		
	Acknowledgement Sent to Donor			

Please note each person who needs a tax receipt must complete a donation form.