

COLLECTION SITE IN-KIND DONATION FORM

Please make sure boxes & bags are labeled with Donor Name

Collection Site: _____

Collection Date: _____

Staff Processing Donation: _____

Processed for Inventory by: _____

Date Received at MM: _____

Thank you letter to be sent to (*please check **ONLY one***): **PLEASE PRINT**

	Church/Organization Name:
	Individual Name:
Address:	
City:	State:
Zip Code:	
Phone Number:	
Email Address:	

	Please do not send a Thank You Letter
--	---------------------------------------

In-Kind Item(s) Donated	Quantity	Weight
Total Weight:		

Notes/Story: (*If you have a story to tell about this donation please write it here. You can also use the back of this page.*)

For office use only:

Donor #:	
Date Thank You Letter prepared:	By: