



REFERENCE #

DS DD Svc

IN-KIND DONATION FORM

Date _____ Giving on behalf of Self Organization Vendor (Invoice Required)

Name Donor		
Name of Organization/Vendor		
Phone	<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Business	
Email		
Street Address City, State, Zip		
Contact Preference	<input type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> No Contact or Acknowledgment	
List Donated Items:		
CATAGORIES		FAIR MARKET VALUE
All Gift Cards (GL460014 Sub Sol Code: GIFT_CARD)		\$
Food & Beverage (GL46003 Sub Sol Code: GIK_FOODBEV)		\$
Cleaning & Office/School Supplies (Toilet paper, Paper Goods, Plasticware, Batteries, Backpacks, etc.) (GL46003 Sub Sol Code: GIK_CLOFCSCH)		\$
Health & Safety (Clothing, Toiletries, Bug Spray, Vitamins, etc.) (GL46003 Sub Sol Code: GIK_HESA)		\$
Furniture, Electronics, Housewares & All Gift Cards (Household Goods, Small Appliances, Bedding, etc.) (GL46003 Sub Sol Code: GIK_FURN)		\$
Computers & Hardware (GL46003 Sub Sol Code: GIK_COMHAR)		\$
Stamps (GL46003 Sub Sol Code: GIK_STAMPS)		\$
Reference Books (Manuals, Bibles, Healing, etc.) (GL46003 Sub Sol Code: GIK_REFBKS)		\$
Holiday Gifts for Residents & Families (GL46003 Sub Sol Code: GIK_HOLIDAY)		\$
Camp Hope Facilities & Maintenance (paint, light bulbs, tools, mowers, etc.) (GL46003 Sub Sol Code: GIK_CHFAC)		\$
Entertainment (Tickets, Holiday, Sporting, Fiction Books, Puzzles, DVDs etc.) (GL46003 Sub Sol Code: GIK_ENT)		\$
Services (Pest, AC, Health, Training, etc.) (GL46004 Sub Sol Code: GIK_SVCS)		\$
Vehicle (Oil, Filters, Maintenance items) (GL46003 Sub Sol Code: GIK_VEH)		\$
Vehicles (GL15050 Sub Sol Code: GIK_VEH) – attach donation form for donation details		\$
Total Fair Market Value		\$
Donor Signature: _____		Date: _____

Received by PTSD FOA & CAMP HOPE REPRESENTATIVE: _____