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## In-Kind Donation Form *Caregiver Appreciation Day*

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| Donor Information |
| |  |  |  |  | | --- | --- | --- | --- | | Full Name: |  |  |  | | Business Name: | First | Last |  | |  |  |  |  | | Address: |  |  |  | |  | Street Address |  | Apartment/Unit # | |  |  |  |  | |  | City | State | ZIP Code | | Phone: | ( ) |  |  |  |  |  | | --- | --- | | Email: |  | |  |  | |
| Donated Item Information |
| I would prefer this gift to remain anonymous.  Please acknowledge my business in marketing materials. |
| Value of item $ |
| |  |  | | --- | --- | |  | Raffle Item | |  | Item Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | Item for Swag Bag | Number of items donated: | ­­­ |  |  |  | | |  | Item Description: |  |  |  |  |  | | |  |  |  |  | | | | |  | |

Email form to [denise@vetspouse.org](mailto:denise@vetspouse.org) or mail to 101 Denison Ave. Elyria, OH 44035. For questions or additional information please call 440-477-4704.