

# DONATION INFORMATION FORM

Must be used for ALL donation items

ABWA Member's Name \_\_\_\_\_

Company's Name \_\_\_\_\_

Company's Address \_\_\_\_\_

\_\_\_\_\_

Contact Name \_\_\_\_\_

Contact's Phone Number \_\_\_\_\_

What is the item? \_\_\_\_\_

What is the value of the item? \_\_\_\_\_

Details of the item \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will donor provide certificate?    Yes / No