

DONATION FORM

(Please type or use blue or black pen)

Donor Information:

BUSINESS/DONOR NAME – FOR ANNUAL REPORT			
DONOR CONTACT NAME:		DONOR ADDRESS:	
PHONE	CITY:	STATE:	ZIP:
EMAIL (This is how we will send you your receipt. Please Print Clearly)			

Cash Donation:

DOLLAR AMOUNT:	IF YOU WOULD LIKE YOUR DONATION TO GO TOWARDS A SPECIFIC NEED, PLEASE LIST HERE:
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Item Information:

ITEM:	ESTIMATED DOLLAR VALUE:
ITEM DESCRIPTION – INCLUDE QUANTITY, SIZE, COLOR, NUMBER OF PERSONS, DAYS/NIGHTS AND <u>ALL RESTRICTIONS</u> :	
<p>MARK APPROPRIATE BOX:</p> <p><input type="checkbox"/> Delivery of item by Donor <input type="checkbox"/> Donor provides Certificate</p> <p><input type="checkbox"/> Item needs to be picked up</p> <p><input type="checkbox"/> Promotional material provided by Donor</p>	
SIGNATURE	DATE:

For office use only:

TFT Staff Member	NAME:	TITLE:
TRACKING NUMBER:	NOTES:	

PLEASE SUBMIT COMPLETED DONATION FORM TO:
Cheryl Todea, ctodea@treesfortomorrow.com
Trees For Tomorrow, 519 Sheridan St. E, PO Box 609, Eagle River, WI 54521

For internal use only:

Director Review
 Entered in Bloomerang

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