



## **Donation Form**

nor (Business Name) Donor Contact			or Contact
Address			
			ZIP
Phone	Email		
			n program?
NOTE: Please fully complete	the above inform	ation for pro	per recognition of your donation.
Date of Donation		Description	n (and restrictions, if any)
Gift Certificate? (Yes/No)	<u>.</u>		
Item			
Value \$			
Please specify if donor will:  deliver  Donation deadline to ensure program	• •	. —	a committee member will pick it up <b>20.</b>
Note: If a donation is a gift certificate, p	olease make the cer	tificate valid a	s of 5/6/2021 with an expiration date of

Liberty House thanks you for your support.

Your generous donation will make a difference in the lives of the children we serve!



5/6/2022 or later. Thank you!

