



DONATION ACKNOWLEDGEMENT FORM

Donation Date: _____

Donation is from: Individual Business/Corporation Business/Corporation Employees Other

Please check one: Ms. Mrs. Mr.

Donor Name (Organization, Company or Individual)

Contact Name (at Company or Organization, if not donated by individual)

Address

City

State

Zip Code

Home or Cell Phone (please circle)

Work Phone

E-Mail

Contribution

In-Kind

Description (supplies or service) _____

Estimated monetary value (as reported by donor) \$ _____

Cash or Check contribution \$ _____

Location accepting donation Fulton Gwinnett Other location: _____

To be completed by PADV Staff

Person accepting donation _____

How did this gift come to PADV (provide as much detail as possible):

Ongoing donor _____

Donor referred to PADV by _____

Volunteer _____

PADV event _____

PADV employee _____

Other _____

Notes: (about how this gift came to PADV and who was responsible for choosing PADV as the recipient)

THANK YOU FOR MAKING A DIFFERENCE WITH YOUR GIFT TO PADV!

*This form serves as notice that your gift is tax deductible. PADV will mail you an acknowledgement letter.
Our Federal Tax ID Number is 58-1314556.*