



Donation Contact Form



CONTACT SECTION

Contact Number	Date	Message

DONATION SECTION

Item Value	Item Description

Gift Certificate Value	Need to be good for 90 days from 3-20-2010
	<input type="checkbox"/> Gift Certificate furnished by business
	<input type="checkbox"/> Gift Certificate to be furnished by Immanuel

DELIVERY SECTION

Delivery Information/Thank you	
<input type="checkbox"/> Will Mail Item/GC	
<input type="checkbox"/> Will drop off at school	
<input type="checkbox"/> Needs to be picked up	Information:
<input type="checkbox"/> Included with this sheet	
<input type="checkbox"/> Thank you sent	

Donation Team Rep: _____