# **Thank you for your contribution to DOVE!!**

# **In-Kind Donation Form**

Name of Donor:

Mailing Address:

Telephone:

E-Mail:

Date of Donation:

 Drop off at DOVE’s office

 Pick-up/Location:

## ***Donation Information***

Donation is to be used for: programs at DOVE’s discretion

 specific program:

Donor’s estimate of value: $

Description of donation(s):

Donation Received by:

Date:

***Thank you for your support of DOVE and the survivors we serve!!***