

2016 IN-KIND DONATION INFORMATION FORM

1200 Old Henderson Road Columbus OH 43220 614-884-HOPE

Fax: 614-884-1227 www.cancersupportohio.org

No one should face cancer alone. Through your generosity, Cancer Support Community Central Ohio makes sure nobody has to.

Donor Name (Business):		
Point of Contact:		
Street Address:		
City	State Zip:	
Phone: Email:		
Donated Item(s) Description:		
Fair Market Value of Donation: \$		
Signature:		
Date:		
Donations are tax deductible to the extent perm the IRS as a 501©3 nonprofit organization.	nitted by law. Cancer Support Community	Central Ohio is recognized by
Tax ID #20-1388385		

OUR MISSION: To ensure that all people impacted by cancer are empowered by knowledge, strengthened by action,

For office use only:

GN: ____ GG: ___ LTR: _

Solicitor: _

and sustained by community.