

## Product Donation Form

Date:

Donor Name:

Donor Email Address:

Donor Mailing Address:

Product Description:

Value of Product(s):

If applicable would you like a charitable tax receipt?

☐ Yes

☐ No

Would you like to be added to our free electronic newsletter?

☐ Yes

☐ No

*\*\*\* Efforts will be made to email applicable tax receipts opposed to regular mail*