



## DONATION INFORMATION FORM

DATE OF GIFT \_\_\_\_\_ RECEIVED BY \_\_\_\_\_ Internal Use Only

### GIFT TYPE & AMOUNT

- CASH/CHECK \_\_\_\_\_
- CREDIT CARD \_\_\_\_\_
- PLEDGE \_\_\_\_\_

### PROGRAM DESIGNATED GIFT

- GENERAL
- OTHER \_\_\_\_\_

Date of Pledge Payment: \_\_\_\_\_ Method of Payment: \_\_\_\_\_

### IN-KIND GIFTS

- CLOTHING
- HOUSEHOLD
- OTHER

### CORRESPONDENCE

- U.S. MAIL
- PHONE
- EMAIL \_\_\_\_\_

### DESCRIPTION OF IN-KIND GIFTS

### DONOR CONTACT INFO

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Please complete one form for each gift.  
All related questions should be directed to Tiffany Harris at (805) 485-6114, ext. 628 or [tphillips@icfs.org](mailto:tphillips@icfs.org)