



IN-KIND DONATION FORM

Donation Company Information:

Company Name: _____

Company Contact: _____

Company Address: _____

Company City: _____ State: _____ Zip: _____

Contact Phone Number: _____ Email Address: _____

Donated Item Names & Description:

Item Value:

Value of Each Item: _____

Number of Items Donated: _____

Date Items Received: _____

Other Info: _____

SUBMIT COMPLETED FORM TO:

AADOM – Contra Costa Chapter

1150 Civic Dr. Suite 101

Walnut Creek, CA 94596

Email: cccaadom@gmail.com