HEART OF GOLD FOUNDATION	DONATION FORM
I. DONOR INFORMATION	
Name/Company:	
Address: City/State/Zip:	
Telephone: Email:	
II. DONATION/CONTRIBUTION INFORMATION	
Cash Contribution – Amount: \$	
Item Donated: (please describe in Part III below)	
Donor will deliver by (date):	
Please have a representative pick up by (date):	
Gift Certificate: (Please describe in Part III below)	
Enclosed	
Donor will deliver by (date):	
Please have a representative pick up by (date):	

III. ITEM DESCRIPTION

Please give a complete description of the item or gift certificate donated for use in the program. Where applicable, include size, variety, color, title, fair market value, etc. and any restrictions or instructions (i.e. expiration or time restrictions).

All donations become the property of Heart of Gold Foundation for fundraising purposes. All proceeds benefit Heart of
Gold Foundation.

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Donor Signature	Date	Solicitor Signature	Date
(Please Print Name)		(Please Print Name)	
Please send the co	mpleted form to in	nfo@heartofgold-foundation.com by Se	ptember 1st, 2024

Heart of Gold Foundation Inc. is a registered 501(c)(3) non-profit organization. Tax ID: 32-0778710. Your contribution is fully tax-deductible to the extent permitted by law. No goods or services were received by the donor in exchange for this contribution.