



1743 Old Olympic Highway
 Port Angeles, PA 98362
 360 457-8206
 Tax ID # 91-6001724

IN KIND DONATION FORM

DATE: ____/____/____

- This is a: Corporate / Business / Organization Gift Individual / Family Gift
- Shelter Donation Auction Item used at event Non-Auction Item Used at Event
- A - Dog Food B - Cat Food C - Animal Bedding
- D - Litter E - Carriers
- F - Other:

Donor Name: _____ **Email:** _____
 (If company, the name of the person who authorized this donation)

Title: _____ **Telephone # ()** _____

Company: _____

Address: _____

(City) _____ **(State)** _____ **(Zip)** _____

Item Description / Details	Approx. Value
Total Value \$	

Donor SIGNATURE: _____

OPHS Representative SIGNATURE: _____