

Date:

DONOR INFORMATION (please print or type)		
Name of Donor (business or individual, for your tax letter)		Add'l Name - business or individual as applicable
CONTACT	Name	
Mailing Address 1		Mailing Address 2
City	State	Zip
Phone	Email	Website
DONATION INFORMATION (please print or type)		
Detailed Description of Donation (limited to about 1,000 characters.)		Estimated Fair Market Value \$
May we thank you on social media? If so, please provide your handles;		Facebook: Instagram: twitter:
Restrictions/Instructions? If so, please provide details.		Will you be delivering your donation: - Via US mail or - In person to El Nido
FOR INTERNAL USE:		
Intake #	Accepted by:	
Please return this form along with donation to:		

El Nido Family Centers
 ATTN: In-Kind Donations
 440 Shatto Place #417
 Los Angeles, CA 90020

volunteer@elnidofamilycenters.org

Thank you for your support!

Your donation may be tax deductible.

El Nido Family Centers is a 501(c) 3 nonprofit organization. Federal Tax ID # 95-3186429

Fair market value is determined by the donor. Please consult your tax advisor for IRS regulations that apply to in-kind donations.