



hephzibah

CHILDREN'S ASSOCIATION

In-Kind Contribution Form *(please print)*

Was this donation made on behalf of a business or organization? __YES __NO

Date _____

Donor _____

Contact Person _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Is this gift made in honor or in memory of a loved one?

Name _____

Occasion _____

Please send an acknowledgment card to:

Name _____

Address _____

Donation information:

Description _____

Value of your donation \$ _____

Hephzibah Children's Association is an accredited 501(c)3 non-profit organization. Contributions and donations are tax-deductible to the extent allowed by law.

Donor Signature X _____

HCA Staff Accepting Donation X _____

Did a monetary contribution accompany this in-kind donation? __YES __NO

Please print and fill out and send to: Hephzibah Children's Association, Attn: Barb Krause,
1144 Lake Street, Oak Park, IL 60301