



# The Baby Fold In-Kind Donation

Date Received: \_\_\_\_\_

Organization: \_\_\_\_\_  
(If Applicable)

Mr. Mrs. Ms. \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Would you like a tax letter for this donation:  Yes  No

**PLEASE FILL OUT FORM AS COMPLETELY AS POSSIBLE**

Description of Items:  New  Used

TBF Staff Receiving Donation \_\_\_\_\_

Condition of Used Items:  Very Good  Good  Fair

Estimated Value \_\_\_\_\_

Describe items: \_\_\_\_\_

Please route **completed** form to Kate Kirby in Development & Public Relations **within 48 hours of donation**. Thanks!



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