

MN SNAP'S FURRYTAIL BALL • OCT. 23, 2021 IN-KIND DONATION FORM



SPAY NEUTER
ASSISTANCE PROGRAM

CONTACT INFORMATION

Donor/Company Name _____

Contact (if different from above) _____

Address (including City, State and ZIP) _____

Phone _____ Email _____

Website _____

ITEM INFORMATION

Item name (brief description, 50 characters or less) _____ Fair Market Value \$ _____

Item description (Please tell us details about this item that we should share with our attendees so we can create an exciting catalog description)

Restrictions and/or Expiration Date (please allow a minimum of 6 months from event date): _____

Contact name and phone for redeeming gift certificate (if applicable): _____

ITEM DELIVERY

PLEASE RETURN COMPLETED FORM AND ITEM OR GIFT CERTIFICATE TO:

MN SNAP

2822 Washington Ave. N, Minneapolis, MN 55411

**Items must be received no later than Oct. 8, 2021
for program recognition.**

- Tangible item accompanies this form
- Gift certificate included with this form
- Donor will deliver item (Date item will be delivered: _____)
- Item needs to be picked up (Date item is available for pick up: _____)
- MN SNAP needs to create a gift certificate
- Other. Explain: _____

Donor Signature and Date: _____

For more information contact:

Joe McDearmon

Joe@mnsnap.org
Furrytailball.com

All materials become the property of MN SNAP upon your surrender. Items will not be returned to donor. MN SNAP reserves the right to combine items into packages.

Minnesota Spay Neuter Assistance Program is a registered 501(c)(3) charitable organization.

Tax ID #90-0397515

Please retain a copy of this form for your records.

For Internal Use

Item Procured by: _____

THANK YOU FOR YOUR SUPPORT!