



**Champions for Children**

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## **CHRISTMAS IN JULY IN-KIND DONATION FORM**

DATE \_\_\_\_\_

NAME \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

DESCRIPTION OF DONATION

\_\_\_\_\_  
\_\_\_\_\_

VALUE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

PLEASE CHOOSE ONE:  ITEM INCLUDED  PLEASE PICK-UP \_\_\_\_\_

(time & date for pick-up)

OTHER COMMENTS OR SPECIAL INSTRUCTIONS FOR ACKNOWLEDGEMENT

\_\_\_\_\_  
\_\_\_\_\_

COMMITTEE MEMBER NAME: \_\_\_\_\_

**THANK YOU FOR SUPPORTING OUR CHILDREN AND FAMILIES!**