



**Nonprofit Organization**

Helping you, help others.

# Charitable Donation Form

Nonprofit Organization

1234 Main St. Somewhere, CA

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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

email: \_\_\_\_\_

Enclosed is my tax deductible gift of: \$ \_\_\_\_\_

I would like my donation applied toward\*:

☐ Dog Food

☐ Medication

☐ Administration

☐ Kennels

☐ Facility

☐ General Fund

\*Please note that all donations will be credited to the organizations General Fund.