



CHRISTMAS BASKETS MULTIPLE DONATIONS FROM ONE LOCATION FORM

Name of Organization / Group / Business etc. that has collected the donations: _____

Name of the person who picked up / dropped off the donations: _____

Contact phone number or email address of pickup / drop off person: _____

Name (First & Last)	Donation type (gift card, cash, cheque etc.)	Donation amount (leave blank if you are unaware of the amount on a gift card)	Full address where donor wants receipt sent	Receipt required?

Date donations were dropped off: _____