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For General Fund: HAW - Operating P.O. Box 650998 Dallas, TX 75265-0998 P.O. Box 650998

**For Capital Expansion** Campaign HAW - Campaign Expansion Attn:HOU1159 Dallas, TX 75265-0998

## **Donation Form**

Thank you for donating to the Houston Area Women's Center. This form will help us properly record your generous gift. Please keep a copy of this form to use as a receipt for tax purposes.

For any questions about your gift, please contact us at giving@hawc.org.

## **Donor Information**

Name	Organization/Compa	ny Name:	
Address	City:	State	Zip
Email:			
Did you organize a fundraising event/	drive? (If so, please des	cribe)	
How did you hear about the Houston	Area Women's Center?		
Would you like to be added to our (er	nail) mailing list? 🛛 Ye	s 🗆 No	
	In kind Dor	ations	
Date of Gift:			
Please indicate type of item(s) you are	donating:		
□ Basic Needs (food, toiletries,	diapers, clothing, etc.)		
Gift Cards: (value/retailer/quantit	y)		
□ Other: (please describe)			
<i>Fair Market Value</i> The IRS does not allow the Houston <i>i</i> is needed for our internal record keep		, , , , , , , , , , , , , , , , , , , ,	
Please indicate the estimated fair n	narket value for your in	-kind donation, if app	blicable: \$
	Monetary Do	onations	
Amount \$ Type: □ Cash I		site at hawc.org/donat	te/

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ For Office Use Only: Received by: \_\_\_\_\_ Date: \_\_\_\_\_

**United Way of Greater Houston**