
Kindly complete the following information and return the completed form with your donation.
PLEASE PRINT.

Contact Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____

Description of Donation:

Estimated Value: \$ _____

I understand that it is my responsibility to substantiate the value of the above donation and to retain a signed acknowledgement from the Girl Scouts of Western New York, Inc. for tax purposes.

Donor Signature: _____

Donation Received By: _____ Date: _____

Thank you from the Girl Scouts of Western New York, Inc.

Girl Scouts of Western New York, Inc.
Attn: Fund Development
3332 Walden Ave., Suite 106, Depew, NY 14043
Phone: (716) 837-6400
Fax: (716) 837-6407

Original—Fund Development Department

Copies—After final approval, copies will be made by the Service Center for distribution to: Accounting Department, and any other necessary department (i.e. Program, Camp, Properties, Product Sales, etc.)