



**Today's Date:** \_\_\_\_\_

Please check the appropriate box:  This donation is from an individual.  
 This donation is on behalf of a company/organization.

Name: \_\_\_\_\_  
Company / Organization (if applicable): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City / State / Zip: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
 Check here to receive Safe Horizon's free e-newsletter.

**GIFT INFORMATION**

Description of items or services donated (*\*please attach any receipts or packing slips*)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

If you are donating computers or printers, please include the make and model number for each item.

Estimate of fair market value of donation (if available): \$ \_\_\_\_\_

How did the individual/company/organization become interested in donating to Safe Horizon? (check one)

- Safe Horizon Employee (name optional) \_\_\_\_\_
- Internet search
- Donated to Safe Horizon in the past
- Other (please provide details) \_\_\_\_\_

**\*\*\* THIS FORM IS NOT A TAX RECEIPT.**

Safe Horizon will mail out an acknowledgment letter regarding your donation, which you can retain for your tax records.

**Please mail form to:** Safe Horizon, Attn: Donor Services, 2 Lafayette Street, 3rd Floor, New York, NY 10007

**Have questions?** Please call us at 212.577.3888 or email us at [fundraising@safehorizon.org](mailto:fundraising@safehorizon.org)