

SIMS Donation Acknowledgment Form

Name of Donor Ms./Mrs./Mr.

Address of Donor

.....
Street City State Zip

Phone Number of Donor
(to be used for questions regarding this donation only)

If Cash Donation:

Date donation received Amount of donation.....

If donation is given in honor of an individual, provide following information:

Name of Honoree
Address of Honoree
.....
Street City State Zip

If donation is given in memory of an individual, provide following information:

Name of individual being memorialized.....
Name of individual to be notified of the memorial gift.....
Address.....
Street City State Zip

In-Kind Donation Information:

Date donation received Describe the donation.....
.....
.....

Describe any goods or services given in exchange for a donation if anything was provided to the donor

If not Donor, name and phone number of person submitting this form

**Please send this form with your check to:
SIMS, Attn. Treasurer, P.O. Box 163238, Sacramento, CA 95816**

For SIMS use only:

Date form submitted to Treasurer.....
Date form submitted to Corresponding Secretary
Date Thank You Letter/Note sent