



Receipt for In Kind Donation

Donor Information:

Name DAV Chapter 16, Somerville, NJ
Address 232 Union Avenue (Rt. 28)
Address 2 _____
City, State, Zip Somerville, N.J. 08876-2661
Email davchapter016@gmail.com
Telephone 908-647-0180 ext. 4459

Community Hope gratefully acknowledges the In-Kind gift(s) described below. Please keep, this will serve as your official receipt.

Donation Description 40 gym bags
100 tote bags
assorted toiletries
Value \$ _____

Community Hope is a private non-profit 501 (c) 3 organization and contributions are deductible to the extent allowed by law. We also acknowledge by this letter that no compensation has been received in return for this contribution.

Once again, we thank you for helping to brighten the lives of those we serve. !

For Completion by Community Hope Staff

Program Using Gift(s): "They Kept Us Safe, Let's Keep Them Warm"
Received by: Stacia McDonough
Date Received: 4/7/17

Please forward a copy of the completed form to whuelsenbeck@communityhope-nj.org

Celebrating 30 Years of Restoring Hope and Changing Lives