



KiDS NEED MORE

Donation and Vendor Tracking Form

Donor Information (please print or type)

Name _____
Billing address _____
City, State, Zip Code _____
Phone 1 | Phone 2 _____
Fax _____
Email _____

Volunteer Information

Name _____
Date _____
Event/Purpose of Donation _____

Donation Information

Item(s) Donated _____

Item Status (where is the donation now)

Donation is enclosed _____
Donation is at MORE Office _____
Donation is with Donor _____
Donation is/was used at event _____
Donation is with volunteer _____

Please return completed form to: info@kidsneedmore.org

Or
KiDS NEED MORE
PO Box 305
Copiague, NY 11726