

Please fill out the enclosed form to assign a value to the donated items.  
Fax to: (650) 326-6673  
Mail to: 2335 El Camino Real, Palo Alto, CA 94306

## Bay Area Cancer Connections In-Kind Donor Form

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Date: \_\_\_\_\_

Name of Donor \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_

Item Donated: \_\_\_\_\_ Quantity: \_\_\_\_\_

Item Donated: \_\_\_\_\_ Quantity: \_\_\_\_\_

Item Donated: \_\_\_\_\_ Quantity: \_\_\_\_\_

Item Donated: \_\_\_\_\_ Quantity: \_\_\_\_\_

**Donor has determined value to be:** \_\_\_\_\_

Office Use:  
Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Please Circle One:            received by mail            received in person