



May 13, 2017 Thrive Gala and Awards Dinner
In-Kind Donation Form

Donor or Company Name: _____
(please print as you wish to be recognized in the promotional materials)

Primary Contact: _____

Title: _____

Address: _____

City/State/Zip: _____

Phone/Fax: _____

Email: _____ Website: _____

Item(s) being donated (values at a minimum of \$25 are appreciated): _____

Item description: _____

Expiration Date: ____/____/____ (one year from our event date would be May 13, 2018)

Black-Out Dates or Special Circumstances: _____

- Gift Certificate Attached
- Please create a certificate based off the information authorized with this form
- Item will be ready for pick up on or after the following date: _____

Authorized Donor Signature *Date*

The Arizona Coalition to End Sexual and Domestic Violence was formed in 1980 and our **mission is to end sexual and domestic violence in Arizona by dismantling oppression and promoting equity among all people.** ACESDV is a 501c(3) nonprofit organization serving the entire state. ACESDV's tax id is: 86- 86-0593601.

Please send completed forms to the attention of Christa, the Communications and Events Coordinator by emailing christa@acesdv.org. Forms can also be mailed to:

ACESDV
Attn: Christa Steiner
2800 North Central Avenue, Suite 1570
Phoenix, Arizona, 85004

For further information, please contact Christa Steiner, at 602-279-2900 or christa@acesdv.org.