



933 Dupont Road, Suite B,  
Charleston, SC 29412

(843) 571-4336

## Gift-In-Kind Form

Business/Organization/Individual: _____
Contact Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Business Phone: _____ Cell Phone _____
Email: _____

Item(s) Donated	Value
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total Value:	_____

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

*If needed, please attach any additional information to this form including copies of receipts, photos, etc.*

Camp Happy Days EIN Number: 57-0755466. Information is for tax purposes and our records, please fill out completely. A thank you/acknowledgement will be mailed upon receipt of completed form.

THANK YOU FOR YOUR GENEROSITY!