



Children's™
Volunteer Health Network
healthy happy kids

Charitable Donation Form

Support CVHN's events by donating goods and services for auction and/or raffle items. CVHN will determine which event the donations provided will be utilized for as to improve the likelihood of maximum benefit.

Donor Name

Contact Name

Address

City

State

Zip Code

Phone

Cell

Email

Item Description

Restrictions (if any) _____

Expiration Date _____ (please provide a date at least 12 months out)

Children's Volunteer Health Network, Inc. does not estimate the value of donations. You may fill in the fair market value of your donations and keep this receipt for tax purposes.

Valued Amount \$ _____ **Suggested Opening Bid \$** _____

Signature

Date

CVHN is a 501(c)3 organization and contributions are tax deductible to the extent of the law. As required by the Internal Revenue Code, there were no goods or services provided to you in consideration for this gift. EIN 20-3276365

CVHN provides access to free dental and vision care to uninsured and underinsured children in Okaloosa and Walton Counties. Please visit www.cvhnkids.org or call 850-622-3200 for more information.