



**MIDWEST MISSION**  
DISTRIBUTION CENTER

**COLLECTION SITE IN-KIND DONATION FORM**

***Please make sure boxes & bags are labeled with Donor Name***

Collection Date: \_\_\_\_\_ Staff Processing Donation: \_\_\_\_\_  
 Collection Site: \_\_\_\_\_ Processed for Inventory by: \_\_\_\_\_  
 Thank You Letter:  Yes  No Date Received at MMDC: \_\_\_\_\_

Thank you letter to be sent to (please check **ONLY one**): **PLEASE PRINT**

<b>Church/Organization Name:</b>		
<b>Individual Name:</b>		
Address:		
City:	State:	Zip Code:
Phone Number:		
Email Address:		

In-Kind Item(s) Donated	Quantity	Weight
<b>Total Weight:</b>		

**Notes/Story:** (If you have a story to tell about this donation please write it here. You can also use the back of this page).

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*For office use only:*

Donor #:	
Date Thank You Letter prepared:	By: