

HHH Gift Registry Donation Acknowledgment/Receipt

This completed form, with receipt(s) attached, must accompany all donations to the Hospital Hospitality House's Two Houses One Heart Capital Campaign purchased from the Hospital Hospitality House gift registries. When signed by an authorized HHH representative, this will serve as an official receipt for this donation. HHH must keep a copy of the completed signed form for their records. Thank you for your support!

Name of Donor

_____ / _____ / _____
 (Business/group) (Department) (Individual donor)

Contact person (if different from above) _____

Donor mailing address _____

Email _____ **Phone** _____

Receipts, invoices or other documentation are attached for which I am requesting a receipt for tax purposes. These items/services were donated to the Hospital Hospitality House of Southwest Michigan, Inc.'s Two Houses One Heart Project and are itemized below.

Item(s):	Source:	Quantity:	Cost:
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
*Total value of donation:			\$ _____

These items are intended for use at the Cottage on:

- Henson Avenue (near Borgess Hospital) Burdick Street (near Bronson Hospital) either location

I understand that I will be listed as a contributor to the campaign as listed under "name of donor" above.

HHH is a 501(c)(3) organization. No goods and/or services were received in return for this donation. I understand that I must consult with my tax professional regarding the deductibility of this gift.

*If the total donation reaches or exceeds \$5000 IRS Form 8283 is required.

 (Donor signature) (HHH authorized signature) (Date)

FOR HHH OFFICE USE ONLY: Value relative to the HHH furnishings budget \$ _____

Entered into GiftWorks by _____ date _____ QuickBooks by _____ date _____

Thank you written/mailed by _____ date _____