



## Donation Form

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_

I am making a Tax-deductible gift of \$ \_\_\_\_\_  
This gift is In Honor of \_\_\_\_\_  
Please notify \_\_\_\_\_ of my donation  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

I wish to make this donation using:

- Cash
- Check
- Item Donation

### Item Donation

Item Description: \_\_\_\_\_  
Location Address: \_\_\_\_\_

Please make checks payable to Columbus Colony Elderly Care. Include donations with this form and mail to:

**Columbus Colony Elderly Care**  
**ATTN: Administrator**  
**1150 Colony Drive**  
**Westerville, Ohio 43081**

Columbus Colony Elderly Care will return a certified donation form for Tax purposes.

**Thank you for your Donation.**