In-Kind
Donation Receipt

1225 Warren Street
St. Louis, MO 63106
314-621-6507 Office
314-241-4913 Fax
www.havenofgracestl.org

The Haven of Grace, a ministry of faith, is a residential and aftercare program providing a safe, nurturing and educational environment for homeless, pregnant women by focusing time and resources on mothers and children as they become families and establish their lives together in the community. Key to this endeavor is our belief in the power of hope and the dignity of each person. Please complete this form and keep it as receipt of your tax-deductible gift. Thank you.

Name: _____ Phone: (_____)_____

Address: _____ City: _____ State: _____ Zip:_____

Email: _____

Would you like to be added to our mailing list? ☐ Would like to learn more about volunteer opportunities? ☐

Quantity	Item Description	Age/Condition	Value

I attest that I am donating the items listed above to the Haven of Grace for charitable purposes and confirm that I have determined the item's value as noted above.

Donor's Signature: _____Date:_____

I acknowledge receipt of the above items and attest that the donor did not receive any goods or services in exchange for the donations listed above.

Staff Signature: _____Date: _____