



Serve the Children

5800 Soundview Dr #E104
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253.851.1794
servethechildren.com

Donation Process

Initial contact made by: _____ Date: _____

Notes: _____

Requested on (date) _____ Received on (date) _____

Requested by: _____ Received by: _____

Donor Name: _____ Phone: _____

Address: _____

Donation of: (list specific items or services):

Estimated Value: \$ _____ Receipt provided

Additional Needs	Name	Date
Thank you phone call: Y / N		
On mailing list: Y / N		
Thank you letter: Y / N		
Newsletter: Y / N		
Additional follow up, notes, etc.:		

*Our mission is to improve the future of children
by meeting their educational, emotional and physical needs in a biblically based environment.*