

DONATIONS RECEIVED BY RESIDENTS

Date _____

Apartment # _____

_____, a resident at _____

Resident Name
Name of Property

received the following donations during their lease term from _____ to _____.

MM/DD/YY
MM/DD/YY

Items	Quantity	Value Each	Total
Daily bus passes			
Toilet paper			
Laundry cards			
Laundry soap			
Dish soap			
Personal hygiene items			
Cleaning products			
Food boxes			
Sack lunches			
Miscellaneous			
Grand total			

Name
Title & Agency

Signature
Date