



Mail-in Donation Form

Print this form and mail it with your tax deductible donation in any amount to:

KCSDV  
634 SW Harrison  
Topeka, KS 66603

Name \_\_\_\_\_

Company / Organization \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

My Company will make a Matching Gift (Y or N): \_\_\_\_\_

If Yes, Company Name: \_\_\_\_\_

Additional comments regarding this donation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enclosed is my contribution of \$\_\_\_\_\_ in support of the statewide effort to end sexual and domestic violence in Kansas.

Under IRS code, because no goods nor services were exchanged for your donation, you may deduct the full value of your gift as a charitable contribution to a qualified 501(c)(3) organization.

Thank you for your time and commitment to ending sexual and domestic violence. You will receive a letter acknowledging your gift which you may use for tax purposes.