



3020 N. Lincoln Ave., Chicago, IL (773) 549-5943  
 5404 N. Clark St., Chicago, IL (773) 271-9382  
 217 W. Harrison, Oak Park, IL (708) 445-0612

**HOWARD BROWN  
HEALTH CENTER**

A nonprofit corporation: FEIN #36-2894128

This form acknowledges the receipt of donations to Howard Brown Health Center, to be used and sold by the organization. All proceeds benefit the programs and services of Howard Brown Health Center. For further information and a complete list of all programs and services, please visit [www.howardbrown.org](http://www.howardbrown.org).

**Received From:**

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(By supplying your email address, you agree to receive periodic mailings from Howard Brown or the Brown Elephant. We will never sell or give away your email address.)

**Donated Items:**

**Value:**


No goods or services were received in exchange for this donation. As donor, you must provide monetary estimate of items donated. If your total claimed deduction for donated property exceeds \$500 during a given tax year, you may be required to file IRS Form 8283. Donated items, or groups of similar items, for which you claim a deduction of more than \$5,000 per item or group of similar items may require a signed appraisal by a qualified appraiser. Consult with your accountant or tax attorney for guidelines.

Date \_\_\_\_\_ Value \_\_\_\_\_

Donor's Signature \_\_\_\_\_ For Howard Brown Health Center:

*Bill Jouse*

**Donor keeps top copy for tax records. Carbon copy is retained by the Brown Elephant Resale Shop.**