



Non Monetary Donation Form
Dona Ana County Democratic Party

Donor Form Portion

Name of Donor _____ Date _____

Address _____

Email _____ Phone _____

Item _____ Value _____

Party Form Portion

Name of Donor _____ Date _____

Address _____

Email _____ Phone _____

Item _____ Value _____

Please return this form to the party Treasurer for record keeping purposes