

FORT BELVOIR ARMY COMMUNITY SERVICE 2024 OPERATION SUGARPLUM DONOR FORM

PRIVACY ACT STATEMENT

PRINCIPAL:

To collect data necessary to enroll DOD personnel and their family members in the Army Community Service client database. Also used as a tool to aid in delivery of services to DOD personnel and their family members. Statistical data will be provided to Department of the

Used as a record of (1) services requested; (2) services delivered; and (3) actions or services **ROUTINE USES:**

agreed upon. Upon data entry, form will be filed.

Disclosure of information is voluntary. Failure to provide required information may result in DISCLOSURE:

the inability of Army Community Service to provide appropriate professional and/or development services to the individual.

DONOR POINT	OF CONTACT (PO	C) INFORMATION		
LAST NAME	FIRST NAM	E		
WORK PHONE # (with a				
EMAIL ADDRESS:				
ORGANIZATION INFORMATION				
NAME				
STREET ADDRESS:				
		ZIP:		
DONATION INFORMATION				
TYPE OF DONATION:		○ TOYS ○ BOOKS ○ HOUSEHOLD ITEM(S)		
PLEASE ANNOTATE & DESCRIBE EACH TYPE OF DONATION(S) BELOW.				

DONATION TYPE	QUANTITY	AMOUNT
		\$
		\$
		\$
		\$
	TOTAL	\$