## MUTT LOVE RESCUE VEHICLE DONATION PICK-UP REQUEST

## Thank you for your donation!

Please complete form and transmit to Sandy at rescue13722@gmail.com or fax to 703-988-2608

Date:		
<b>Donor Information:</b>		
Name:		
Address:		
Phone:	Alternative #:	
E.M.:1.		
E-Mail:		
Vehicle Location (if different than a	above).	
vennere Bounton (ir univerent than e		
Vehicle Information:		
Year:		
) (1		
Make:		
VIII.		
VIN:		
License:		
Electise.		
Odometer:		
Please check all that apply:		
2-Door		
4-Door		
Station Wagon		
4-Wheel Drive		

Does the vehicle run and drive as is?YesNo		
Explain:		
Do you have the	title?Yes	No
Explain:		
Interior:	<b>Body Damage:</b>	Problems:
Excellent	None	None
Good	Front End	Engine
Fair	Read End	Transmission
Poor	Driver Side	Tires
	Passenger Side	Other
Please give brief	description of problems:	
Special Instruct	ions (if any):	