

SOUTHERN BAPTIST DISASTER RELIEF – REGION 3
Arkansas, Texas-TBM, Texas-SBTC, Missouri, Louisiana, Oklahoma, Mississippi
VENDOR FORM

Date: _____

Open Account In-Kind Rental

Vendor Name _____

Vendor Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Type of Account _____

Purpose of Account _____

PERSON(S) ALLOWED TO USE ACCOUNT

Name _____

Name _____

Name _____

Name _____

Name _____

Organization Opening Account _____

IN-KIND INFORMATION

Type of In-Kind Donation _____

Description of Donation (Trailer Number, License Number, VIN Number, Color, Length, Weight, Amount, Etc. (Provide as much detail as possible).

Value of Donation _____