



2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

Please complete this profile (9 pages) for each agency, program and site you want to list with 2-1-1.

AGENCY (This is the administrating organization for the program provider or provider group.)

Lead Agency Name _____

PROGRAM (This is the formal name of the program that helps clients.)

Program Name _____

SITE (This is the name of the place or location were the services are provided.)

Site Name _____

Is there an abbreviation
or other name gone by? _____

AKA (Also Known As)

Is this project part of a service group or collaboration between multiple agency partners? YES NO

As part of your intake process, does this agency, program or site exclude clients based on race, ethnicity, sexual orientation, religion, or disability? YES NO

Person In Charge Name _____

Person In Charge Title _____

Person In Charge Email _____

Person In Charge Phone _____

Contact Person 1 Name _____

Contact Person 1 Title _____

Contact Person 1 Email _____

Contact Person 1 Phone _____

Contact Person 2 Name _____

Contact Person 2 Title _____

Contact Person 2 Email _____

Contact Person 2 Phone _____



2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

Resource Contact Person _____
Communicates with 2-1-1 Resource Dept for Program Updates

Contact Title _____

Contact Phone _____

Contact Fax _____

Contact E-mail _____

Street Address _____

(more) Street Address _____

City _____

State _____

Zip _____

County _____

Same as Street Address Confidential Address

Mailing Address _____

(more) Mailing Address _____

City _____

State _____

Zip _____

County _____

Telephone 1 Description: _____ Number: () _____

Telephone 2 Description: _____ Number: () _____

Telephone 3 Description: _____ Number: () _____

Telephone 4 Description: TDD / TTY _____ Number: () _____

Fax () _____

General Email _____



2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

Website Address _____

Description of Services

Please list those services you provide to anyone meeting your eligibility requirements. Callers are referred to your agency based on this description. We have the right to edit this information for brevity, clarity, and content as well as publish this data in a variety of media formats.

Hours of Operation _____

Legal Status

- City/County/Parish Faith Based Non-profit Federal For Profit Other
 Private Individual Private Non-Profit Public Service Police/Sheriff State

Federal ID Number (EIN/FEIN) _____

Year of Incorporation _____

IRS Status _____

Licenses or Accreditations _____

Languages Served

- Check ALL that apply: Bosnian Cambodian Chinese Creole Croatian
 English Farsi Greek Korean Laotian Monge Russian Serbian
 Sign Language Spanish Vietnamese Other _____

Service Capacity _____



2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

Eligibility

Qualifications needed in order to utilize services.

Exclusions to Eligibility

Specifics that disqualify utilizing services.

Yes No

Handicap Access

Check all that apply: Wheelchair Accessible Sign Language Interpreters Other _____

Transportation

Transportation available?

Client Pick-up/Van Bus Token/Pass Available Bus Stop Nearby (___ blocks)
 In-home Care No Transportation Provided Other _____

Intake Procedure

Call for Appointment Walk-ins Welcome
 Agency referral required (*by whom?*) _____
 Other _____

Documentation Required

Picture ID SS card Birth certificate Proof of residency Proof of income
 Verification of expenses Eviction/shut-off notice Marriage Certificate
 Other _____

Are the items above needed for?

Head of Household Only Individual Enrolling Entire Household
 Other _____

Income Criteria:

100% of Federal Poverty Level 150% of Federal Poverty Level No set criteria
 Other _____

Fee Structure

None/ No Charge Sliding Scale Other _____

Payment Methods Accepted

No fees/charges Cash/Checks Credit Card County Insurance Insurance Kidcare
 Medicaid Medicare Tricare Other _____

Zone A Zone B Zone C Zone D Zone E (Non-Evac) Other _____

Evacuation Level

- Hernando County Evacuation Levels: http://www.co.hernando.fl.us/em/gis_flood.asp or call **352-754-4083**.
- Pinellas County Evacuation Levels: <http://www.pinellascounty.org/emergency/Local.htm> or call **727-453-3150**.

2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

COUNTIES SERVED

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> *County - Out of State
<input type="checkbox"/> <u>ALL</u> Florida Counties
<input type="checkbox"/> Alachua County
<input type="checkbox"/> Baker County
<input type="checkbox"/> Bay County
<input type="checkbox"/> Bradford County
<input type="checkbox"/> Brevard County
<input type="checkbox"/> Broward County
<input type="checkbox"/> Calhoun County
<input type="checkbox"/> Charlotte County
<input type="checkbox"/> Citrus County
<input type="checkbox"/> Clay County
<input type="checkbox"/> Collier County
<input type="checkbox"/> Columbia County
<input type="checkbox"/> Dade County
<input type="checkbox"/> Desoto County
<input type="checkbox"/> Dixie County
<input type="checkbox"/> Duval County | <input type="checkbox"/> Escambia County
<input type="checkbox"/> Flagler County
<input type="checkbox"/> Franklin County
<input type="checkbox"/> Gadsden County
<input type="checkbox"/> Gilchrist County
<input type="checkbox"/> Glades County
<input type="checkbox"/> Hamilton County
<input type="checkbox"/> Hardee County
<input type="checkbox"/> Hendry County
<input type="checkbox"/> Hernando County
<input type="checkbox"/> Highlands County
<input type="checkbox"/> Hillsborough County
<input type="checkbox"/> Holmes County
<input type="checkbox"/> Indian River County
<input type="checkbox"/> Jackson County
<input type="checkbox"/> Jefferson County
<input type="checkbox"/> Lafayette County
<input type="checkbox"/> Lake County | <input type="checkbox"/> Lee County
<input type="checkbox"/> Leon County
<input type="checkbox"/> Levy County
<input type="checkbox"/> Liberty County
<input type="checkbox"/> Madison County
<input type="checkbox"/> Manatee County
<input type="checkbox"/> Marion County
<input type="checkbox"/> Martin County
<input type="checkbox"/> Monroe County
<input type="checkbox"/> Nassau County
<input type="checkbox"/> Okaloosa County
<input type="checkbox"/> Lee County
<input type="checkbox"/> Okeechobee County
<input type="checkbox"/> Orange County
<input type="checkbox"/> Osceola County
<input type="checkbox"/> Palm County
<input type="checkbox"/> Beach County | <input type="checkbox"/> Pasco County
<input type="checkbox"/> Pinellas County
<input type="checkbox"/> Polk County
<input type="checkbox"/> Putnam County
<input type="checkbox"/> Santa Rosa County
<input type="checkbox"/> Sarasota County
<input type="checkbox"/> Seminole County
<input type="checkbox"/> St Johns County
<input type="checkbox"/> St Lucie County
<input type="checkbox"/> Sumter County
<input type="checkbox"/> Suwannee County
<input type="checkbox"/> Taylor County
<input type="checkbox"/> Union County
<input type="checkbox"/> Volusia County
<input type="checkbox"/> Wakulla County
<input type="checkbox"/> Walton County
<input type="checkbox"/> Washington County |
|---|--|--|---|

2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

CITIES SERVED

Hernando County	Pinellas County
<input type="checkbox"/> Serves All Cities in Hernando County	<input type="checkbox"/> Serves ALL Cities in Pinellas County
<input type="checkbox"/> Bayport	<input type="checkbox"/> Bay Pines
<input type="checkbox"/> Brooksville	<input type="checkbox"/> Belleair
<input type="checkbox"/> Garden Grove	<input type="checkbox"/> Belleair Beach
<input type="checkbox"/> Hernando Beach	<input type="checkbox"/> Belleair Bluffs
<input type="checkbox"/> Istachatta	<input type="checkbox"/> Belleair Shore
<input type="checkbox"/> Lake Lindsey	<input type="checkbox"/> Clearwater
<input type="checkbox"/> Masaryktown	<input type="checkbox"/> Crystal Beach
<input type="checkbox"/> Nobleton	<input type="checkbox"/> Dunedin
<input type="checkbox"/> Pine Island	<input type="checkbox"/> Gulfport
<input type="checkbox"/> Ridge Manor	<input type="checkbox"/> Indian Rocks Beach
<input type="checkbox"/> Rolling Acres	<input type="checkbox"/> Indian Shores
<input type="checkbox"/> Royal Highlands	<input type="checkbox"/> Kenneth City
<input type="checkbox"/> Spring Hill	<input type="checkbox"/> Largo
<input type="checkbox"/> Spring Lake	<input type="checkbox"/> Madeira Beach
<input type="checkbox"/> Weeki Wachee	<input type="checkbox"/> North Redington Beach
	<input type="checkbox"/> Ozona
	<input type="checkbox"/> Palm Harbor
	<input type="checkbox"/> Pass-A-Grille
	<input type="checkbox"/> Pinellas Park
	<input type="checkbox"/> Redington Beach
	<input type="checkbox"/> Redington Shores
	<input type="checkbox"/> Safety Harbor
	<input type="checkbox"/> Seminole
	<input type="checkbox"/> South Pasadena
	<input type="checkbox"/> St. Petersburg
	<input type="checkbox"/> St. Petersburg Beach
	<input type="checkbox"/> Tarpon Springs
	<input type="checkbox"/> Treasure Island



2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

Target Population (Who does this Agency, Program or Site serve?)

- | | |
|---|---|
| <input type="checkbox"/> Older Adults (65+) | <input type="checkbox"/> Families/Friends of Inmates/Ex-Offenders |
| <input type="checkbox"/> Adults (18+ yet not considered Older Adults) | <input type="checkbox"/> Families/Friends of Mentally Ill |
| <input type="checkbox"/> Young Adults (15-25) | <input type="checkbox"/> Families/Friends of Missing Persons |
| <input type="checkbox"/> Youth (younger than 18) | <input type="checkbox"/> Families/Friends of Murder Victims |
| <input type="checkbox"/> ▪ Adolescents (13-17) | <input type="checkbox"/> Families/Friends of People with AIDS/HIV |
| <input type="checkbox"/> ▪ Children (4-12) | <input type="checkbox"/> Families/Friends of People with Alzheimer's Disease |
| <input type="checkbox"/> ▪ Emancipated Minors | <input type="checkbox"/> Families/Friends of People with Cancer |
| <input type="checkbox"/> ▪ Infants/Toddlers | <input type="checkbox"/> Families/Friends of People with Disabilities |
| <input type="checkbox"/> ▪ Latchkey Children | <input type="checkbox"/> Families/Friends of People with Eating Disorders |
| <input type="checkbox"/> ▪ Newborns | <input type="checkbox"/> Families/Friends of People with Sexual/Love Addictions |
| <input type="checkbox"/> ▪ Unaccompanied Minors | <input type="checkbox"/> Families/Friends of Sexual Assault/Abuse Survivors |
| <input type="checkbox"/> Caregiver Subsidy Recipients | <input type="checkbox"/> Families/Friends of Stolen Children |
| <input type="checkbox"/> CHIP Recipients | <input type="checkbox"/> Families/Friends of Suicides |
| <input type="checkbox"/> Disability Benefit Recipients | <input type="checkbox"/> Families/Friends of Terminally Ill |
| <input type="checkbox"/> Eligible Benefits Applicants | <input type="checkbox"/> Former Foster Children |
| <input type="checkbox"/> Ex-Public Assistance Recipients | <input type="checkbox"/> Layoff Survivors |
| <input type="checkbox"/> Food Stamp Recipients | <input type="checkbox"/> People Without Health Insurance |
| <input type="checkbox"/> In Home Supportive Services Subsidy Recipients | <input type="checkbox"/> Separated/Separating Persons |
| <input type="checkbox"/> Long Term Welfare Recipients | <input type="checkbox"/> Couples |
| <input type="checkbox"/> Medicaid Recipients | <input type="checkbox"/> Families |
| <input type="checkbox"/> Medicare Beneficiaries | <input type="checkbox"/> Parents |
| <input type="checkbox"/> Social Security Recipients | <input type="checkbox"/> Pets |
| <input type="checkbox"/> SSI Recipients | <input type="checkbox"/> Siblings |
| <input type="checkbox"/> TANF Recipients | <input type="checkbox"/> Single Adults |
| <input type="checkbox"/> Unemployment Recipients | <input type="checkbox"/> Crisis Shelter Residents |
| <input type="checkbox"/> Workers Compensation Recipients | <input type="checkbox"/> Foster Home Residents |
| <input type="checkbox"/> Formal Caregivers | <input type="checkbox"/> Group Home Residents |
| <input type="checkbox"/> Informal Caregivers | <input type="checkbox"/> Homeless Shelter Residents |
| <input type="checkbox"/> Refugees/Entrants/Asylees | <input type="checkbox"/> Homeowners |
| <input type="checkbox"/> Undocumented People | <input type="checkbox"/> Mobile Home Park Residents |
| <input type="checkbox"/> Developmental Disabilities | <input type="checkbox"/> Retirement Community Residents |
| <input type="checkbox"/> Functional Disabilities | <input type="checkbox"/> Supportive Housing Residents |
| <input type="checkbox"/> Health Conditions | <input type="checkbox"/> Transitional Housing/Shelter Residents |
| <input type="checkbox"/> Hearing Impairments | <input type="checkbox"/> Active Military |
| <input type="checkbox"/> Learning Disabilities | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> Mental Illness/Emotional Disabilities | <input type="checkbox"/> Court Referred Individuals |
| <input type="checkbox"/> Physical Disabilities | <input type="checkbox"/> Criminal Suspects |
| <input type="checkbox"/> Substance Abusers | <input type="checkbox"/> Defendants |
| <input type="checkbox"/> Terminal Illness | <input type="checkbox"/> Drug Offenders |
| <input type="checkbox"/> Visual Impairments | <input type="checkbox"/> Juvenile Delinquents |
| <input type="checkbox"/> Functional Illiteracy | <input type="checkbox"/> Parolees |
| <input type="checkbox"/> Limited English Proficiency | <input type="checkbox"/> Probationers |
| <input type="checkbox"/> School Dropouts | <input type="checkbox"/> Sex Offenders |
| <input type="checkbox"/> Children with Disabilities | <input type="checkbox"/> Females |
| <input type="checkbox"/> Divorced/Divorcing Persons | <input type="checkbox"/> Males |
| <input type="checkbox"/> Ex-Offenders | <input type="checkbox"/> Gay/Lesbian/Bisexual/Transgender Individuals |
| <input type="checkbox"/> Families of Military Personnel/Veterans | <input type="checkbox"/> Homeless People |
| <input type="checkbox"/> Families/Friends of Abused Children | <input type="checkbox"/> Previously Homeless People |
| <input type="checkbox"/> Families/Friends of Adult Incest Survivors | <input type="checkbox"/> Travelers |
| <input type="checkbox"/> Families/Friends of Alcoholics | <input type="checkbox"/> Abused Adults |
| <input type="checkbox"/> Families/Friends of Battered Women/Men | <input type="checkbox"/> Abused Children |
| <input type="checkbox"/> Families/Friends of Chronically Ill | <input type="checkbox"/> Accident Victims |
| <input type="checkbox"/> Families/Friends of Compulsive Gamblers | <input type="checkbox"/> Crime Victims |
| <input type="checkbox"/> Families/Friends of Cult Members | <input type="checkbox"/> Crime Witnesses |
| <input type="checkbox"/> Families/Friends of Drug Abusers | <input type="checkbox"/> Disaster Victims |
| <input type="checkbox"/> Families/Friends of Frail/Dependent Elderly | <input type="checkbox"/> Holocaust Survivors |
| <input type="checkbox"/> Families/Friends of GLBT Individuals | <input type="checkbox"/> Sexual Harassment Victims |
| <input type="checkbox"/> Families/Friends of Holocaust Survivors | |

Volunteer Opportunities (What opportunities do you have available RIGHT NOW for volunteers?)

2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

- | | |
|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Amateur Radio Operator Volunteer Opportunities <input type="checkbox"/> Animal Foster Care/Rescue Volunteer Opportunities <input type="checkbox"/> Artist Volunteer Opportunities <input type="checkbox"/> Bereavement Volunteer Opportunities <input type="checkbox"/> Bingo Caller Volunteer Opportunities <input type="checkbox"/> Blood Drive Assistant Volunteer Opportunities <input type="checkbox"/> Board/Committee Member Volunteer Opportunities <input type="checkbox"/> Braille Transcription Volunteer Opportunities <input type="checkbox"/> Call Center Volunteer Opportunities <input type="checkbox"/> Camp Counselor Volunteer Opportunities <input type="checkbox"/> Child Care Volunteer Opportunities <input type="checkbox"/> Classroom Aide Volunteer Opportunities <input type="checkbox"/> Clerical Volunteer Opportunities <input type="checkbox"/> Coaching Volunteer Opportunities <input type="checkbox"/> Companionship Volunteer Opportunities <input type="checkbox"/> Crafts Volunteer Opportunities <input type="checkbox"/> Crime Prevention Volunteer Opportunities <input type="checkbox"/> Dental Care Volunteer Opportunities <input type="checkbox"/> Disaster Related Damage Assessment Volunteer Opportunities <input type="checkbox"/> English Language Instruction Volunteer Opportunities <input type="checkbox"/> Environmental Protection/Advocacy Volunteer Opportunities <input type="checkbox"/> Equestrian Therapy Volunteer Opportunities <input type="checkbox"/> Errand Running/Shopping Volunteer Opportunities <input type="checkbox"/> Evacuation Center/Shelter Assistance Volunteer Opportunities <input type="checkbox"/> Event Coordination Volunteer Opportunities <input type="checkbox"/> Event Setup/Cleanup Volunteer Opportunities <input type="checkbox"/> Exercise/Fitness Leader Volunteer Opportunities <input type="checkbox"/> Finance/Accounting Volunteer Opportunities <input type="checkbox"/> Food Collection Volunteer Opportunities <input type="checkbox"/> Food Sorting/Packing Volunteer Opportunities <input type="checkbox"/> Foster Parenting Support Volunteer Opportunities <input type="checkbox"/> Fundraising Volunteer Opportunities <input type="checkbox"/> Gallery/Museum Sitting Volunteer Opportunities <input type="checkbox"/> Government Intern Volunteer Opportunities <input type="checkbox"/> Guardians Ad Litem Volunteer Opportunities <input type="checkbox"/> Handy worker Volunteer Opportunities <input type="checkbox"/> Holiday Related Volunteer Opportunities <input type="checkbox"/> Hospice Care Volunteer Opportunities <input type="checkbox"/> Hospital/Institutional Visit Volunteer Opportunities <input type="checkbox"/> Inmate Support Volunteer Opportunities <input type="checkbox"/> Job Coach Volunteer Opportunities <input type="checkbox"/> Law Enforcement Volunteer Opportunities <input type="checkbox"/> Legal Services Volunteer Opportunities <input type="checkbox"/> Library Assistant Volunteer Opportunities <input type="checkbox"/> Literacy Volunteer Opportunities <input type="checkbox"/> Litter Cleanup Volunteer Opportunities <input type="checkbox"/> Meal Delivery Volunteer Opportunities <input type="checkbox"/> Meal Preparation/Serving Volunteer Opportunities <input type="checkbox"/> Medical Care Volunteer Opportunities <input type="checkbox"/> Mentoring Services Volunteer Opportunities <input type="checkbox"/> Nature Trail Volunteer Opportunities <input type="checkbox"/> Nursing Care Volunteer Opportunities | <ul style="list-style-type: none"> <input type="checkbox"/> Painting/Wallpapering Volunteer Opportunities <input type="checkbox"/> Parenting Support Volunteer Opportunities <input type="checkbox"/> Performer/Musician Volunteer Opportunities <input type="checkbox"/> Playground Aide Volunteer Opportunities <input type="checkbox"/> Pregnancy Related Volunteer Opportunities <input type="checkbox"/> Public Relations Volunteer Opportunities <input type="checkbox"/> Public Speaking Volunteer Opportunities <input type="checkbox"/> Reading Encouragement Volunteer Opportunities <input type="checkbox"/> Recreational Activities Volunteer Opportunities <input type="checkbox"/> Respite/Home Health Care Volunteer Opportunities <input type="checkbox"/> Safety/Disaster Education Volunteer Opportunities <input type="checkbox"/> Sales/Cashier Volunteer Opportunities <input type="checkbox"/> Sexual Assault Volunteer Opportunities <input type="checkbox"/> Sign Language Volunteer Opportunities <input type="checkbox"/> Speech and Hearing Volunteer Opportunities <input type="checkbox"/> Storytelling Volunteer Opportunities <input type="checkbox"/> Meal Delivery Volunteer Opportunities <input type="checkbox"/> Meal Preparation/Serving Volunteer Opportunities <input type="checkbox"/> Medical Care Volunteer Opportunities <input type="checkbox"/> Mentoring Services Volunteer Opportunities <input type="checkbox"/> Nature Trail Volunteer Opportunities <input type="checkbox"/> Nursing Care Volunteer Opportunities <input type="checkbox"/> Painting/Wallpapering Volunteer Opportunities <input type="checkbox"/> Parenting Support Volunteer Opportunities <input type="checkbox"/> Performer/Musician Volunteer Opportunities <input type="checkbox"/> Playground Aide Volunteer Opportunities <input type="checkbox"/> Pregnancy Related Volunteer Opportunities <input type="checkbox"/> Public Relations Volunteer Opportunities <input type="checkbox"/> Public Speaking Volunteer Opportunities <input type="checkbox"/> Reading Encouragement Volunteer Opportunities <input type="checkbox"/> Recreational Activities Volunteer Opportunities <input type="checkbox"/> Respite/Home Health Care Volunteer Opportunities <input type="checkbox"/> Safety/Disaster Education Volunteer Opportunities <input type="checkbox"/> Sales/Cashier Volunteer Opportunities <input type="checkbox"/> Sexual Assault Volunteer Opportunities <input type="checkbox"/> Sign Language Volunteer Opportunities <input type="checkbox"/> Speech and Hearing Volunteer Opportunities <input type="checkbox"/> Storytelling Volunteer Opportunities <input type="checkbox"/> Substance Abuse Prevention/Treatment Volunteer Opportunities <input type="checkbox"/> Support Group Facilitation Volunteer Opportunities <input type="checkbox"/> Swimming Instructor Volunteer Opportunities <input type="checkbox"/> Teaching/Instruction Volunteer Opportunities <input type="checkbox"/> Thrift Shop Support Volunteer Opportunities <input type="checkbox"/> Tour/Exhibit Guide Volunteer Opportunities <input type="checkbox"/> Tutoring Volunteer Opportunities <input type="checkbox"/> Usher/Ticket Taker Volunteer Opportunities <input type="checkbox"/> Volunteer Income Tax Assistance Programs (use VITA Programs) <input type="checkbox"/> Volunteer Program Management Assistance <input type="checkbox"/> Weekly Volunteers <input type="checkbox"/> Writing/Editing Volunteer Opportunities <input type="checkbox"/> Youth Court Volunteer Opportunities |
|---|--|

Donation Opportunities (What donations are you seeking for this program)

2-1-1 Tampa Bay Cares Inc. Agency / Program Profile Form

Please take a moment to complete this profile for each agency and all individual programs / locations.

- Animal Food/Supplies Donation Program
- Bone Marrow Donation Registries
- Building Materials/Supplies Donation Programs
- Clothing Donation Programs
- Drinking Water Donation Programs
- Food Donation Programs
- Holiday Donations
- Household Goods Donation Programs
- Leisure Equipment/Supplies Donation Programs
- Medical Equipment/Assistive Technology Donation Programs
- Military Donations/Relief Programs
- Natural Hair/Wig Donation Programs
- Office Equipment/Supplies Donation Programs
- Organ Donations (use Organ and Tissue Banks)
- Personal Care Supplies Donation Programs
- Plant Donation Clearinghouses (use Plant/Tree Banks)
- Plant/Gardening Materials Donation Programs
- Pre-Disaster Donations Collection/Storage
- Real Estate Donation Programs
- Safety Equipment Donation Programs
- School Supplies Donation Programs
- Tools/Equipment Donation Programs
- Vehicle Donation Programs