



CANISTER TRANSFER FORM

Please submit this form immediately upon transferring a Donation Canister to from one Circle to another.

DATE: _____ REPORTING PERSON: _____ PHONE: _____

TRANSFERRING CIRCLE: _____ TRANSFERRED TO: _____

Canister No. (issued by KD office)	Location (business name) And full address/city/state/zip	Business Phone number	Business Website	Circle Member Servicing Canister (name)	Phone no. of Person Servicing

Submit completed form to:

The King's Daughters Office | 601 Children's Lane, 2nd floor | Norfolk, VA 23507 | Tel: 757.668.7098
 Fax: 757.668.8907 | Email: info@kingsdaughters.org