



Receipt of In-Kind Donation

I: DONOR INFORMATION

DONOR: _____

(Please print full name. If Company, please include a contact name)

DONOR'S ADDRESS: _____

(Street Address)

(City)

(State)

(Zip Code)

DONOR'S PHONE: _____

DONOR'S EMAIL: _____

II: CONTRIBUTED GOODS OR SERVICES

DESCRIPTION OF GOODS OR SERVICES CONTRIBUTED:

(Please provide a detailed description. If applicable, include quantities or amounts, serial numbers, and where donation will be located or how it will be used.)

RECEIVED BY: _____

DATE RECEIVED: _____

III: DETERMINATION OF VALUE

A. Fair Market Value of goods or services received: _____

B. Were goods or services received by the donor in exchange for this donation? _____

(If yes, provide a description and value for the goods or services received by the donor)

Description: _____ Value: _____

C. Fair Market Value of the Donation (A-B=C) \$ _____

Donor Signature to verify Fair Market Value: _____

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To be filed by development office after proper acknowledgement.

THANK YOU!!!

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