

In Kind Donation

Company: _____
(as you would like name to appear in donor recognition)

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____

Cell Phone _____

Email: _____

Tax ID or EIN: _____

Description of In Kind donation:

For which event/program is the above donation designated?

Estimated Value * \$ _____ Date of Donation: _____

The IRS requires, for our records and yours, an estimation of the dollar amount of a non-cash contribution. Gifts valued at \$5,000 or greater require an independent appraisal.

Special Instructions:

