



In-Kind Donation Form

Date: _____

Donation Type: **In Kind**

Individual Organization

Name _____

Company Affiliation (if applicable) _____

Address _____

City, State _____ Zip _____

Email _____

Phone _____

Donation Amount \$ _____

Purpose of Donation _____

In Kind Donations

Quantity	Item	Estimated Value

Thanks for your generous gift!

Received by (Families First Staff)

Donor Signature

All contributions are tax deductible.
The IRS requires that donors make their own valuations.

For office Use

Development Manager
Database Input
Acknowledgement Letter

Received: _____

Date: _____

Date: _____

Special Events Coordinator

Received: _____