

childadvocates®

In-Kind Donation Acknowledgment Form

DONOR:

ORGANIZATION:

ORGANIZATION NAME _____

ORGANIZATION CONTACT NAME _____

ADDRESS _____

PHONE NUMBER _____

INDIVIDUAL:

NAME _____

ADDRESS _____

PHONE NUMBER _____

EMAIL ADDRESS _____

ITEM(S) DONATED:

DESCRIPTION _____

DATE OF DONATION _____ VALUE OF DONATION \$ _____

OTHER / NOTES:

Please provide this form and copies of receipts/proof of market value (if available) to the Development Team so an acknowledgement can be completed and mailed.

FOR CHILD ADVOCATES STAFF USE:

CONSTITUENT ID #: _____

DATE RECORDED IN DATABASE: ___ / ___ / _____

DATE ACKNOWLEDGMENT LETTER SENT: ___ / ___ / _____