

IN-KIND DONATION RECEIPT

Receipt No. _____

Date _____

DONOR INFORMATION

Donor Name _____

Address _____

City, State, Zip _____

Phone / Email _____

DESCRIPTION OF DONATED GOODS / SERVICES

DETAILED DESCRIPTION OF ITEMS	QUANTITY	ESTIMATED VALUE	CONDITION

Thank you for your generous contribution. The organization is a registered 501(c)(3) non-profit organization. No goods or services were provided in exchange for this contribution other than the intangible religious or personal satisfaction of supporting our mission.

**Note to Donor: Federal law does not permit charitable organizations to establish or certify the value of non-cash contributions. The valuation of the donated items listed above is the responsibility of the donor.*

Authorized Representative Signature

Recipient Organization Representative

Representative Name & Title

Please print