



**Gift-In-Kind / Non Cash Donation Form**

Donor name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Description of item(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Value: \_\_\_\_\_ *(to be provided by donor)*

Please check one:

- Donor Statement of Value       Appraisal attached       Receipt attached  
*(for items valued at \$5,000+)*

Donor's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Gift received by: \_\_\_\_\_ Date: \_\_\_\_\_