



In-Kind Donation Form

Date: _____

Donation Type: **In Kind**
 Individual Corporation

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 (Agape Staff)

Donor Signature

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

For Office Use

- Development Assistant
 Database Input
 Acknowledgement Letter

Received: _____
Date: _____
Date: _____

- Special Events Coordinator

Received: _____