

## **Gift-in-Kind Acceptance Form**

Donor Name (Individual or Business):		
Contact Name (if Business):		
Street Address:		
City:	State:	Zip:
Phone: Email: _		
Program or Department Receiving Gift:		
Date Gift Received:	Value of Gift: \$	<u> </u>
How was value determined: □By Donor	□IRS Qualified Apprais	ser □Internet Research
□Other, please describe:		
Description of Gift(s) (Brand, Model, Quar	•	·
□Additional Documentation Attached/Ema	ailed □Photograph	s of Gift(s) Attached/Emailed
Donor Signature:		Date:
Staff or Board Member Acceptance Signa	iture:	
Staff or Board Member Printed Name:		Date:
In-Kind Donations between \$500 - \$5,000 r the donor wishes to claim the dedu In-Kind Donations of \$5,000 & up require	uction and should contact an IRS Form 8283, signed	t his/her tax consultant. d by an authorized appraiser, is