IN-KIND DONATION RECEIPT

Charity Name: _____

Street Address: _____

City, State, Zip: _____

Tax ID (Find on the IRS Website): _____

Date: _____

Donated By: _____

Donor Address: _____

City, State, Zip: _____

Description of Donated Item(s)	Quantity	Value ($)

Total Value of Donated Item(s): _____ Dollars

($_____)

Authorized Signature _____

Print Name _____