



# In-Kind Donation Form

All information is required for donor tax receipt and GMCN financials.  
Donor will receive a gift acknowledgment letter within 2 weeks.

|                            |               |
|----------------------------|---------------|
| <b>Name:</b>               | <b>Date:</b>  |
| <b>Group/Company Name:</b> |               |
| <b>Mailing Address:</b>    |               |
| <b>City, State, Zip:</b>   |               |
| <b>Email:</b>              | <b>Phone:</b> |

## # Item(s) Donated

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |

## How Did You Hear About Us?

|                       |               |                  |
|-----------------------|---------------|------------------|
| <b>Media:</b>         | <b>Event:</b> | <b>Internet:</b> |
| <b>Friend/Family:</b> | <b>Work:</b>  | <b>Other:</b>    |

## Office Notes:

Received by

Department (CS, FS, other)

Inventoried by