



## In-Kind Donation Form

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

### Description of Donation

*(Example: 2 boxes of books; 1 bag of clothes)*

\_\_\_\_\_  
Why did you select Little Flower or St. John's Residence for Boys for your donation?

\$ \_\_\_\_\_  
\*Value *(It is the responsibility of the donor to establish the value of the donation for charitable deduction purposes)*

\_\_\_\_\_  
Donation Expiration Date (if any)

\_\_\_\_\_  
Donor Signature

### Office Use:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Donation Received By: Name and Date



Check box if donation was received after office hours