



IN-KIND (NON-CASH) DONATION FORM

Please provide complete information when filling out this form.

DONOR INFORMATION

INDIVIDUAL DONORS: MR. MRS. MS. MR. & MRS. DR. OTHER: _____

NAME(S): _____

CORPORATE / ORGANIZATION DONORS:

ORGANIZATION NAME: _____

CONTACT PERSON'S NAME: _____ TITLE: _____

ALL DONORS:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ EMAIL ADDRESS: _____

IN-KIND DONATION DESCRIPTION

DATE OF DONATION: _____ CONDITION OF DONATION: NEW USED OTHER: _____

DESCRIPTION OF DONATION (PLEASE BE AS SPECIFIC AS POSSIBLE): _____

SPECIAL EVENT (IF APPLICABLE): _____

FAIR MARKET VALUE OF DONATED ITEM/SERVICE: \$ _____

OR

DISCOUNT GIVEN ON ITEM/SERVICE PURCHASED BY FOOD BANK: \$ _____

DONOR SIGNATURE: _____ DATE: _____

PLEASE NOTE: IRS regulations governing In-Kind donations require the donor to provide substantiation for items over \$500 in value. As a courtesy, the Food Bank will provide donors of items valued at \$500 or more with a copy of the appropriate IRS Form (Form 8283), which the donor must complete. A written appraisal must be included with the form for items valued at \$5,000 or more.

QUESTIONS? PLEASE CALL BARB AT 412-460-3663, EXT 291.

RETURN COMPLETED FORM TO THE ATTENTION OF BARB BOJE

PLEASE MAIL TO THE ADDRESS ABOVE OR FAX TO 412-460-0418

THANK YOU FOR YOUR SUPPORT!

Name of GPCFB employee/volunteer accepting gift: