



# IN-KIND DONATION RECEIPT

**CHECK CATEGORY**

Meal

Food

Clothing

Other

**DONOR DETAILS****NAME****PHONE****ADDRESS****CITY****STATE****ZIP****E-MAIL****DESCRIPTION OF ITEMS**

Item Description

**VALUE**

Item Description

**VALUE**

Item Description

**VALUE**

Item Description

**VALUE****SIGNATURE****DATE**

No goods or services were provided in exchange for this donation.