

In Kind Donation of Materials, Supplies or Services

| Activity or Event | | |
|---|-------|--------|
| Describe Purchase | | |
| Date Submitted | | |
| | | |
| Description / Vendor | | Amount |
| | | |
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| Attach receipts (if available) to this form | Total | |
| | | |
| Donation Made By: NAME | | |
| | | |
| | | |
| PHONE NUMBER | | |
| EMAIL | | |