



In-Kind Donation Form

Donor is to receive a copy of this form once completed and signed by staff member accepting the gift.

Donor Name _____

Business _____

Address _____

City _____ **State** _____ **ZIP** _____

Phone _____ **Email** _____

Goods / Services Description (List items separately*)	Quantity	\$ Value
*Copies of receipts for new/purchased goods may be attached instead of listing items separately.	Total Est. Value:	

Date of Gift(s) _____

Intended Purpose of Gift(s) _____

- Donor Privacy**
- I consent to my donation being publicly acknowledged
- I wish to remain anonymous

DISCLOSURE: Montrose Counseling Center, Inc. [MCC] is a 501c3 charitable organization. All donations are tax-deductible to the fullest extent allowed by law. This form may serve as a record of donations given to the organization, but is not offered as legal tax advice and should not be used as such. Please contact your tax professional to answer questions regarding how you should calculate the value of your donation for tax purposes. The management of MCC reserves the right to utilize or dispose of the donated item(s) as determined necessary for the sole benefit of MCC.

MCC USE:

Person accepting donation _____ Date _____ Donor given copy? **Y N**

Condition/appraisal details _____

GW Date _____ By _____