QuincyArtCenter

In-Kind Donation Form

Date Goods Were Received: _____

Donor Contact Information

Full Name:_____

Address:_____

Phone:_____

Email:_____

List and Fair Market Value of Donated Goods

Donated Goods	Fair Market Value *provided by the donor
Total Fair Market Value	

*The Quincy Art Center is not in a position to set or confirm the market value that the donor declared.

On behalf of the board and staff, I want to thank you for your in-kind donation that will help us

_____

and serve the mission of the Quincy Art Center. This donation may be used for fundraising in the form of sale, auction, or raffle/drawing.

Restrictions, if applicable:_____

Our auditor asks that we inform you of the following regarding your donation.
"In compliance with federal tax laws effecting charitable institutions we acknowledge that you have received no goods or services for your contribution. Please retain this letter for your tax records as substantiation of any charitable contribution deductions."

Authorized Staff Signature: _____ Date: _____