

In-Kind Donation Form

House # _____ Date: _____ Project Address: _____

DONOR Name _____ Submitted by: _____

Street Address: _____

City, State, Zip: _____

Email: _____ Phone: _____

Skilled Labor provided: _____ workers @ _____/hr for _____ hrs. _____ workers @ _____/hr for _____ hrs.	Volunteer Labor: _____ volunteers for _____ hours																
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Internal Recording: GL 4115/7585: \$
GL Date
Thank you sent: