

In-Kind Donation Receipt

Organization Name

Organization Address

Date of Receipt

Receipt Number

Donor Name

Donor Address

Description of Donated Items or Services

Estimated Value (if applicable)

Date of Donation

Additional Notes

Authorized Signature

Printed Name

Title

Date

Donor Signature

Printed Name

Date

Note: This receipt acknowledges the above in-kind donation. No goods or services were provided in exchange for this contribution unless otherwise specified. Please retain this for tax purposes. Consult a tax advisor regarding deductibility.