



Master Gardener Foundation of Thurston County

In Kind Contribution Acknowledgment Request

INSTRUCTIONS: List the item(s) being donated and fair market value. Attach copies of receipts or indicate how value was determined if receipts aren't available.

(1) Program event or area _____ Date if Request _____

(2) Describe item(s) being donated and fair market value. If no receipts, indicate how value was determined.

(3) Total value of donation: _____

(4) Requester's signature:: _____

(5) Requester's printed name:: _____

(6) Acknowledgement to be made to: _____

Address: _____

(7) Signature Approval from Foundation Project Chair, Lead or Program Manager::

_____ Date approved _____

TREASURER'S USE ONLY

Date Acknowledgement Mailed: _____