



Judson Center

Helping those in need succeed

IN-KIND CONTRIBUTION FORM

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ E-mail: _____

Donor Signature: _____ Date: _____

Item(s) Donated:

Donor Stated Value:*

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Donor Stated Value: \$ _____

***As a matter of Judson Center policy, the donor is responsible for establishing the value of the contributed items.**

No goods and services were provided in consideration for this gift. As a non-profit entity, Judson Center has been granted tax-exempt status under the Internal Revenue Service Code 501 (c) (3). Copies of the IRS certification letter are available upon request. Federal Tax ID.# 38-1359084.

FOR OFFICE USE ONLY

This contribution is **unrestricted**, please use the contributed item (s) in a manner beneficial to Judson Center.

This contribution is **restricted**, the specific purpose is _____

Received By: _____ Received Date: _____

Designated Program: _____ Program Manager: _____

Donation Location: Genesee Grosse Pointe Macomb Oakland Washtenaw Wayne