



**Fiscal Sponsorship Program
In-Kind Donations**

Please only submit this form if your donor has requested a thank you letter.

Name of Project: _____

Name of Donor: _____

Donor Address: _____

City: _____ State: _____ Zip: _____

Telephone #: _____ E-Mail: _____

Item(s) or Service(s) Donated

Notes: _____

Name: _____ Phone: _____

(Project Director must submit this form, electronic signature is acceptable)

Signed: _____ Date: ____/____/____

For Office Use Only:	CP Prog Mgr _____	CP Exec Dir _____
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