



### IN-KIND DONATION FORM

PLEASE PRINT ALL OF THE FOLLOWING INFORMATION:

HELP USA Site to receive donation (if applicable): \_\_\_\_\_

Today's Date: \_\_\_\_\_ Date of Donation: \_\_\_\_\_ Time: \_\_\_\_\_

Name of Person Completing This Form: \_\_\_\_\_

Name of Donor/Organization: \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home #: (\_\_\_\_) \_\_\_\_\_ Work #: (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

#### Details of Donation (Please Itemize):

Item:	Value:	Condition (Excellent, Good, Fair, Poor)

TOTAL: \$ \_\_\_\_\_

\_\_\_\_ I would prefer that my donation not be sold to a third party to raise funds to benefit HELP USA's programs and services.

To the best of my knowledge the amount of estimated value of the donation represents the true fair market value of the donated items.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please mail to:  
 Attn: In-Kind Donations  
 HELP USA, 5 Hanover Square, 17<sup>th</sup> Floor New York, NY 10004  
 Or Fax to (212) 400-7005