



**IN-KIND  
DONATION FORM**

This form serves as verification that the undersigned donated product(s) and/or service(s) to Anchor Center for Blind Children.

Donor Name(s) \_\_\_\_\_

Business Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone - Home \_\_\_\_\_ Work \_\_\_\_\_

Mobile \_\_\_\_\_ Email \* \_\_\_\_\_

\* Providing my email address grants Anchor Center the permission to send information and communication. My address will not be provided or sold to any other organization.

Description of Product(s)/Service(s)



List Special Event (if applicable) \_\_\_\_\_

Estimated Value (provided by donor) \$ \_\_\_\_\_

\_\_\_\_\_  
Donor Signature (if available)

\_\_\_\_\_  
Date

Anchor Center for Blind Children reserves the right to refuse in-kind donations if the item/service cannot be used by the agency. It is the sole responsibility of the donor to determine the value of a donation. Anchor Center employees cannot determine the value or sign anything that agrees or disagrees with the value claimed. Gifts of real estate, vehicles or items valued at over \$5,000 must have acceptance approval by the Development Department. For gifts valued at over \$5,000 Anchor Center is required to complete and file all applicable IRS forms.

**Anchor Center for Blind Children**  
2550 Roslyn Street · Denver, CO 80238  
(Phone) 303-377-9732 · (Fax) 303-377-9744 · www.anchorcenter.org

~ OFFICE USE ONLY ~

Item added to spread sheet - date \_\_\_\_\_ initials \_\_\_\_\_ RE - date \_\_\_\_\_ initials \_\_\_\_\_

Thank you sent - date \_\_\_\_\_ initials \_\_\_\_\_

(Original to Development – Copy to Donor)

Revised 6/2018