



Special Olympics
Idaho

IN-KIND CONTRIBUTION WORKSHEET

Thank you for your support of Special Olympics Idaho.

In order for us to accurately reflect the true cost of operating our program it is important for us to have a record of your in-kind contributions. This report summarizes in-kind contributions of time, goods, and services. Please be as complete as possible in describing your contribution and use the back of this form if more space is necessary. Use a separate expense reimbursement form to list expenses for which you wish to be reimbursed.

Donor Name: _____

Address: _____

City: _____

State: _____

ZIP: _____

Contact: _____

Phone: _____

Goods & Services ~ Contributed goods and services are those for which you will receive no reimbursement from Idaho Special Olympics; i.e., long-distance phone charges, postage, photocopies, supplies, mileage or other transportation, meals or lodging, equipment, food, etc. Please provide a value for all donated goods & services. Special Olympics Idaho cannot assign a value for donated goods. **When donating purchased goods, please provide a receipt of purchase if possible.**

Date	Description of Goods or Services	Contrib. Value
		\$
	Total Value of Goods & Services	\$

Contributions of Time ~ Volunteer hours have a monetary value only if the hours are spent doing the same type of work for which you are normally paid; i.e., computer programming, accounting, legal consultation, etc.

Date	Professional Hours (list occupation & service provided)	No. Hrs.	Hrly. Rate	Contrib. Value
			\$	\$
	Total Value Of Contributed Time			\$

Donor Signature: _____

Received By (SOID Signature): _____