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## Gift In Kind Donation Form

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Company/Individual

Date of Gift

Company Contact

Address

City/State/Zip

Phone (preferred)

Email Address

| Describe the donation | List condition of the good. Leave blank for contributed services. | Donor's estimate of fair market value |
|-----------------------|---|---------------------------------------|
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**PLEASE NOTE: HomeCare and Hospice of the Valley cannot attach a proper dollar value to your gift.** Federal tax laws impose certain reporting obligations for charitable contributions of property other than cash. IRS Form 8283 and its instructions can assist you with your reporting obligations.

HomeCare and Hospice of the Valley (Tax ID #26-3651313) gratefully acknowledges the In Kind gift(s) described above. Please keep this receipt. Your contribution is tax deductible to the extent allowed by law.

**Please return form to:**

Development Office, HomeCare and Hospice of the Valley, 823 Grand Ave. #300, Glenwood Springs, CO 81601 or email to [giving@HCHOTV.org](mailto:giving@HCHOTV.org).