In Kind Contribution - COMMUNITY/PROFESSIONAL PLEASE be sure all information is legible and complete. Donor's First and Last Name Date of donation Check One: Community Mailing Address Location/Classroom Professional City, State, ZIP Program Student Intern E-mail TIME DONATION - ONCE PER MONTH See back of form for logging multiple time donations for month **Professional Qualification:** Student Intern: Occupation: • Example: High School student, retired professional (specify) • Type of profession, years of experience, level of degree (educational qualification(s)) attained. School Attending: Services Provided: (specific duties performed i.e. classroom Field of Study: aide, guest speaker and topic, etc.) Number of hours _____ Rate per hour GOODS DONATION (Includes mileage, kid's clothing, supplies, equipment, materials, etc.) Please itemize AND state the value of each item, i.e. 2 eight-piece puzzles @ \$2.50 each; 3 pkgs. of 75 Styrofoam cups @ .89 each, etc. Date Items Donated Value Date Items Donated Value

				Value Total		
CASH DONATION			*** <u>A</u>	*** <u>ALL</u> donated cash or checks must be delivered		
Amount			to	the Fiscal Department with the	e completed	
\$				In-kind Contribution form, prior to spending		

Donor/Volunteer Signature

Date

Reach Dane Authorized Signature

Date

1

In Kind Contribution - COMMUNITY/PROFESSIONAL

PLEASE be sure all information is legible and complete. Donor's first and last name Check One: Date of donation Community Mailing Address Location/Classroom Professional City, State, ZIP **Program** Student Intern E-mail TIME DONATION **Professional Qualification:** Student Intern: Occupation: •If student, school and year (i.e. West High School -(educational qualification(s)) Sophomore) and major field of study. • If professional, specify profession, years of experience, degree attained. School Attending: Field of Study: Services Provided: (specific duties performed i.e. classroom Time In **Time Out Total Hours** aide, etc.) **Date TOTAL**

A federal requirement of 25% local share, cash, or in-kind, must be met to enable this Agency to receive federal funds. Reach Dane, administers local, state and federally funded programs in the city of Madison and Dane and Green counties and is a tax-exempt organization described under Wisconsin Sales and Use Tax Law Section 77.54 (9a) and under Section 501 (c) (3) of the Internal Revenue Code. As a contributor, you will receive a letter in January confirming your contributions. 170 (01/17)

Date

Reach Dane Authorized Signature

Volunteer Signature

Date