



## GIFT-IN-KIND CONTRIBUTION FORM

Date: \_\_\_\_\_ Chose Ride: Tour de Pink East Ride / Tour de Pink West Ride

### Donor Information:

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

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

Daytime Phone \_\_\_\_\_ Fax (Optional) \_\_\_\_\_

Gift Description:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated fair market value (by donor): \$ \_\_\_\_\_

Special instructions (e.g., item delivery or pick up, restrictions, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return this form to: [info@ysctourdepink.org](mailto:info@ysctourdepink.org)

Please send tracking information when provided to: [info@ysctourdepink.org](mailto:info@ysctourdepink.org)

*This form does not serve as a receipt for this contribution, but is intended for our internal record keeping purposes only. If a tax receipt is needed please request from [cnovak@youngsurvival.org](mailto:cnovak@youngsurvival.org).*