



In-Kind Donation Form

Donor Information:

First name: _____ Last name: _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Gift Information:

Detailed description of donation: _____

Expiration Date (If applicable, for certificates, please allow one year from date given): _____

Fair market value of item (FMV): _____

Description of how FMV is determined: _____

Solicitor Contact Information:

JA Employee/Committee or Board Member Name: _____

E-mail: _____

***Please email this form to:
Alex Nocera
alex@jasouthflorida.org***