



Fundraising Event In-Kind Form

It is the responsibility of the solicitor named below to forward the completed donation form to the Histiocytosis Association. In return, the Histiocytosis Association will issue an in-kind receipt to the donor. All proceeds generated from this gift will benefit the programs of the Histiocytosis Association.

**James E. Doyle Memorial Golf Outing & Auction
August 19, 2017**

PLEASE TYPE OR CLEARLY PRINT THE INFORMATION REQUESTED BELOW.

Solicitor's Name		Solicitor's Phone Number	
Donor's Full Name		Company Name (if applicable)	
Address	City	State/ZIP	
Phone Number		Email Address	

USE THIS AREA TO RECORD IN KIND (NON-MONETARY) GIFTS (description and FMV must be completed)

Description of item/service donated	Fair Market Value (FMV)
Item #1	\$
Item #2	\$
Item #3	\$
Item #4	\$
Item #5	\$
Item #6	\$

Donor's Signature	Date
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