

Food and Inventory In-Kind Contribution Form

Please complete this form for all food and inventory donations. This document serves as a record of your contribution for inventory tracking and donor acknowledgment purposes.

Donor Information

Donor/Organization Name:

Contact Person:

Address:

Phone Number:

Email Address:

Donation Details

Please provide a detailed description of the contributed food and/or inventory items. For food items, please include expiration dates where applicable.

Item Description	Quantity / Case Count	Estimated Fair Market Value (Per Unit)	Total Estimated Value	Expiration/Best By Date (if applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Storage & Handling Requirements

Does any food require specific temperature controls (e.g., Frozen, Refrigerated, Dry)?

Are there any known allergens or special handling instructions?

Donor Acknowledgment

By signing below, the donor certifies that the donated items are fit for human consumption or use, and that the estimated values provided are accurate to the best of their knowledge.

Donor Signature: Date:

Organization Use Only

Received By (Staff Name): Date Received:

Storage Location Assigned: Entered into Inventory System by: