

## **In-Kind Donation Form**

To be used by ACC Partner Programs when an inkind donation has been made on behalf of a component program of the ACC. \*This program is a partner of Angel Charitable Corporation, a recognized 501(c)3 corporation in the state of Nevada.

EIN: 88-107246

Name of Program*:	<del></del>
Donor Name:	
Fill out Donor Address below:	
Donor Address:	
Donor Phone #:	Donor Email:
Contact Person: (If different from donor)	Phone#:
number. For services: a description of the service that was	
Were any good or services provided to the donor in	Internal Use Only
exchange for the contribution? ☐ Yes ☐ No	Fund Name:ACC Rep. Initials:
If yes, what was the value \$	
and provide a description:	

Please submit completed, signed form(s) with any available documentation to:

The Angel Charitable Corporation 203 S. Water Street, Suite 310 Henderson, NV 89015 (702) 202-0745

info@theangelcc.com