



RECEIPT / FORM FOR INKIND AND MONETARY DONATIONS

Today's Date: \_\_\_\_\_

Received by: \_\_\_\_\_

(Please print)

Name of Contributor: \_\_\_\_\_ Contact ID#: \_\_\_\_\_

Address: \_\_\_\_\_ Student ID#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

<input type="checkbox"/> CASH RESTRICTED \$ _____	PROJECT: _____
<input type="checkbox"/> CASH UNRESTRICTED \$ _____	RECEIPT #/DEPT: _____

INKIND Contribution Item(s): <i>(If more space is needed, attach list to this form)</i>	Value: <i>(approx.)</i>
<b>Total Value:</b>	

Overall condition of the INKIND item(s): \_\_\_\_\_

Designation/Use: *(i.e.: None; School; Gallery; SOHO outreach; Event; General)* \_\_\_\_\_

NOTES or SPECIAL INSTRUCTIONS:

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**Thank you for your contribution to The Art League!**

This document serves as a receipt for your donation—you will receive a letter for formal acknowledgement and tax purposes within 2 weeks of submitting this form. If you do not receive your letter, please contact our Development Department at 703.519.1741 or [develop@theartleague.org](mailto:develop@theartleague.org)

**Tax ID# 54-0833818**

**ART LEAGUE STAFF:**

1. Please give one copy of this form to donor and one copy to the Development Office.
2. If cash donation, MUST provide donor with copy of a receipt—a department receipt or this form.
3. Please date this form.