

## LOF Donation Attestation Form

Project Title: \_\_\_\_\_ Project # \_\_\_\_\_

Donor: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

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

Donated:

- |  |  |
|--|--|
| <input type="checkbox"/> Services<br><input type="checkbox"/> Equipment Usage<br><input type="checkbox"/> Materials<br><input type="checkbox"/> Real Property<br><input type="checkbox"/> Cash | <input type="checkbox"/> In-Kind Force Account Labor<br><input type="checkbox"/> In-Kind Stock Material<br><input type="checkbox"/> In-Kind Contractual Services<br><input type="checkbox"/> In-Kind Other Allowable |
|--|--|

Values of materials included in the matching share of a project budget should be reasonable and should not exceed current market prices at the time they are charged to the project. Records of in-kind contributions of materials shall indicate the fair market value by listing comparable prices and vendors.

Date	Description of Donation	Fair Value of Donation	Comparative Value
<b>Total Value of Donation .....</b>		<b>\$</b>	

\_\_\_\_\_  
Signature of Person Donating Date

\_\_\_\_\_  
Signature of Grantee (Name and Title) Date