

# IN-KIND DONATIONS

in support of the  
Children's Dyslexia Center of West Michigan

**Please complete and return the top of this form with the donated item to:  
Children's Dyslexia Center of West Michigan,  
233 Fulton St. East, 5th floor, Grand Rapids, MI 49503.**

DONOR NAME: \_\_\_\_\_

DONOR COMPANY(if applicable): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

Description of New, Unused, Donated Item or Service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Conditions/Restrictions: \_\_\_\_\_  
\_\_\_\_\_

Retail Value: \$ \_\_\_\_\_ Solicitor's Name: \_\_\_\_\_

\_\_\_\_\_ No goods or services were provided in exchange for this gift. (Check line if true.)

Donor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## **\*Donor Receipt for In-Kind Donation**

in support of the  
Children's Dyslexia Center of West Michigan  
Providing free one-to-one tutoring for children with dyslexia  
and free graduate level training to teachers.  
Website: [www.dyslexiatutoring.org](http://www.dyslexiatutoring.org)

Description of New, Unused, Donated Item or Service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Retail Value: \$ \_\_\_\_\_ Solicitor's Name: \_\_\_\_\_

Donor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Children's Dyslexia Center of West Michigan is a 501(c)(3) tax-exempt  
nonprofit organization: Federal ID# 04-3169620. Office phone: (616) 776-6840.**

**\*This is your receipt. Please keep for your records.**