

Florida Small Business Development Center Network

Record of In-Kind Contributions

Name of Contributor	
Phone Number	
E-Mail	

Volunteer Services (Counseling and Training)

Date and Time of Service Performed	
Description of Services Performed (volunteer counselor, workshop speaker, hours contributed, etc.):	
Rate Charged (per hour)	
Value of Donated Services	
Basis for Rate Charged:	

Non-Expendable Property *

Date Property Provided	
Type of Property: Office Facility/Classroom Facility/Public Service Announcement, Other (Explain):	
Fair Market or Rental Value	
Additional Information Description:	

Expendable Property

Office Supplies	
Equipment	
Handouts (brochures and other printed material)	
Other (Explain)	

TOTAL	
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Volunteer Services: I certify that I have placed a fair market value on my donated services.

Signature of Volunteer:

Donated Property: I certify supporting documentation is on file to support the fair market/rental value of the non-expendable and expendable property reported above.

Signature:

Record for matching purposes toward program identified below (SBDC, PTAC, Other)

Program:

SBDC Representative:

Signature:

Title:

Date:

* Supporting documentation on fair market/rental value of non-expendable and expendable property should be kept on file.