

SRQG Donation in Kind

Year: _____ Name: _____ (please print)

Description of item(s) donated	Cost of item	Donation Date
1. _____	\$ _____	_____
2. _____	\$ _____	_____
3. _____	\$ _____	_____

Want tax donation letter (include address below) Don't need tax donation letter

Address: _____

The purpose of this form is to document that SRQG meets the public support requirement for each year. Thank you for your generosity, and please help us by documenting your donation.

Thank you, Treasurer

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