MSNHA Grant/Partnership
In-Kind Contribution/Donation Form

Project/event name:

Grant or Partner name:

1 Description of contribution:

2 Date(s) contributed:

3 Real or estimated value of contribution:

4 How was value determined?

5 Who made this determination?

6 Is there a restriction on the use of this contribution? No_____Yes_____If "yes," what are the restrictions?

7 Was this contribution obtained with or supported by federal funds? No_____ Yes_____If "yes," list name of federal agency and grant or contract number:

Grant or Partnership Coordinator Signature:_____

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