

# Florida Small Business Development Center Network

## Record of In-Kind Contributions

<b>Name of Contributor</b>	
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	
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)	

<b>TOTAL</b>	
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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.