

Name/Organization			
Organization Contact Name, Title			
Address			
City	State	Zip	
() Preferred Phone En	mail		
Trooned Hone	Hall		
Detail Description			
Estimated Value (determined by donor)	\$		
	w.		
The Shea Center welcomes in-kind donation	ns to support our thera	peutic horse-related pi	rograms. Before
making an in-kind donation, please review the	e following guidelines:		
	**************************************		•
 Donated items become the property 		d cannot be returned.	
 Please reference IRS code for items 	valued over \$500.	•	
You will receive an acknowledgment letter in	the mail for tax purposes	S.	
Shea Center Info:			

Date

Received by

Shea Center Representative