## Highland Rim Economic Corporation/Head Start INDIVIDUAL IN-KIND CONTRIBUTIONS

Volunteer Name: (Please print)					Center/Classroom:		
Contri	butor P	rofile: (Please chec	k one)F	irst Time Volu	nteer/Donor	rReturnin	g Volunteer/Donor
	senting:	(Please check one	?)				
Non- Parent	Parent	Former Parent/Guardian	Sibling Other				
			VOLUNTE	 ER HOURS/I	DONATIO	NS:	
Month/Day/ Year		Purpose/Activity/Donated Goods For Donated Goods please make a detailed list of items				Quantity/ Number of Hours	\$ Value of Donated Goods
Volunteer/Contributor Signature Date				High	Highland Rim Head Start Staff Signature & Date		
For B	usines	s Office Only:					
Value of MILES: miles @ .47/1				@ .47/mile =		Value \$	
<b>Donated Goods</b> =					Value \$		
Value of TIME:total hours			_total hours (	@ \$	/hr =	Value \$	
				Gr	and Total:	\$	