



Tennessee Emergency Management Agency  
3041 Sidco Drive, Nashville, TN 37204

## In-Kind Contribution Receipt

### DONOR INFORMATION:

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATE CONTRIBUTED: \_\_\_\_\_

ESTIMATED VALUE OF DONATION: \$ \_\_\_\_\_

DESCRIPTION OF DONATION: \_\_\_\_\_

*No invoice or other request for payment will be submitted to the State of Tennessee, Department of Military, or Tennessee Emergency Management Agency on volunteerism and community service for these goods or services.*

\_\_\_\_\_  
AUTHORIZED DONOR SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
AUTHORIZED DONOR **PRINTED** NAME

\*\*\*\*\*

Thank you for your contribution of the above listed items or services. No goods or services were provided to you in exchange for your contribution.

\_\_\_\_\_  
AUTHORIZED AGENCY SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
AUTHORIZED AGENCY **PRINTED** NAME