

CHARITABLE CONTRIBUTION WORKSHEET

Do you have receipts for your contributions? _____

LEGAL NAME OF CHARITY	AMOUNT DONATED	LEGAL NAME OF CHARITY	AMOUNT DONATED

NAME OF CHARITY:				Do you have receipts?	
ADDRESS		DATE DONATED		DATE ACQUIRED	
CITY, STATE ZIP		HOW WAS IT ACQUIRED		DONORS COST	
DESCRIPTION of items donated		FAIR MARKET VALUE		HOW DID YOU VALUE THIS?	

NAME OF CHARITY:				Do you have receipts?	
ADDRESS		DATE DONATED		DATE ACQUIRED	
CITY, STATE ZIP		HOW WAS IT ACQUIRED		DONORS COST	
DESCRIPTION of items donated		FAIR MARKET VALUE		HOW DID YOU VALUE THIS?	

NAME OF CHARITY:				Do you have receipts?	
ADDRESS		DATE DONATED		DATE ACQUIRED	
CITY, STATE ZIP		HOW WAS IT ACQUIRED		DONORS COST	
DESCRIPTION of items donated		FAIR MARKET VALUE		HOW DID YOU VALUE THIS?	

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