

Soroptimist International of the Americas

SOROPTIMIST INTERNATIONAL OF BOISE IN KIND CONTRIBUTION FORM

Name:			Date:		
Officer or Committee: Address:			Email:Phone:		
Date	Description of Contributed Items (Service	Purpose = Conference/ or Meeting/Official Visit/etc.	Real or Approx Value	How was Value Determined? (actual, appraisal, fmv)	
	GRAND TOTAL				
• 1 • 3 • (Make a copy for your reco	r all expenses (copies of phone bords of receipts and Expense forned with receipts to SI Boise Treatist.net	n submitted		
Send original to: SI Boise Treasurer		Signed:			
PO Box 8885 Boise, ID 83707-2885		Date Submitted:			
		Date Paid:	<u>Che</u>	eck No.:	
		By:		Club Treasurer	