

Acceptance Form

| Name of Donor/Company: |
|------------------------|
| |
| Contact Person: |
| |
| Address: |
| |
| City/State/ZIP: |
| |
| Phone Number: |
| |
| Date of Acceptance: |
| |
| Gift Received By: |
| |

| Approximate value of gift (as determined by donor): | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| Valuation Method: | |
| Acknowledged By: | |
| Date: | Heartspring Representative |
| All items donated are income tax deductible at their present fair market value. Inte stimating the value upon the donor, rather than the agency receiving the gift. I.R.S rice which a buyer is willing to pay and a seller willing to accept. No goods or servio | 5. advises that "fair market value" is interpreted at that |

complies with the substantiation requirement under I.R.S. Code Section 170(f)8).

Creating hope and opportunity that changes the lives of children with special needs and their families 8700 E. 29th St. N. Wichita, KS 67226 Phone: 316-634-8700 HEARTSPRING.ORG