

GIFT OF GRAIN DONATION FORM

A contribution of ______ bushels of ______ (type of grain) from the ______ (year) harvest will be donated to the Jackson County Community Foundation. It is understood that upon delivery, the grain will become the property of the Foundation and the Foundation will be responsible for the sale of the grain.

The grain will be delivered to	(r	name of elevator),
(city)	(state), with delivery anticipated prior to	(date).

The elevator will be instructed to credit the grain to an account in the name of the Jackson County Community Foundation, P.O. Box 381, Holton, KS 66436. Donor requests that proceeds from the sale of the grain, less selling expenses, be used for (check one):

□ Jackson County Community Foundation for area of greatest need, or

Donor understands this gift of grain will be subject to the Foundation's gift acceptance policies.

Name as you want it to appear on letter of acknowledgement: _____

Address: _____ City, ST: _____

Phone #: _____ Email Address: _____

Donor Signature

Date

Date

Donor Signature

This portion to be completed by JCCF:

Receipt of Pledge:

Jackson County Community Foundation

Date

Questions? Contact the Jackson County Community Foundation at info@jacksoncountycf.org, or GMCF at foundation@mcfks.org, (785)587-8995