

FRESNO EOC HEAD START
IN-KIND CONTRIBUTION OF SPACE

Head Start
1920 Mariposa Mall
Suite 200
Fresno, CA 93721
(559) 263-1200

(For frequent or in-frequent use of a facility for: LPC Meetings, Parent Workshops, Committee Meetings, Trainings, etc.)

MO/YR: _____

SERVICE AREA: _____ AREA/SITE: _____

DONOR: _____ TELEPHONE: _____

DONOR'S ORGANIZATION: _____

ADDRESS: _____ CITY: _____ ZIP: _____

NAME OF FACILITY USED: _____

JULY	AUG	SEPT	OCT	NOV	DEC
JAN	FEB	MARCH	APRIL	MAY	JUNE

VALUE: \$ _____ / day x _____ days = \$ _____

PURPOSE FOR USE: _____

DONOR'S SIGNATURE: _____ DATE: _____

STAFF SIGNATURE: _____ DATE: _____