DONOR COPY	Receipt #
ST. JUKE'S	

RECEIPT FOR DONATED GOODS

No Services or Goods are provided in Exchange for Donations

DONOR:				
	(Last Name)or Company Name		(First Name)	(MI)
Address:				
	City		State	Zip Code
Phone:		Fax:		
E-mail:				

This will acknowledge WITH THANKS the donation of the listed articles or goods to the St Luke's Free Medical Clinic to assist in the furtherance of its mission to provide free comprehensive health services to county residents who lack access to medical care.

	Description of Donated Property	Fair Market Value
Α		
В		
C		
D		
E		
F		
	Total	\$0.00

By:____

Georgia Vaughn CEO

Date:

<u>NOTICE</u>

The valuation of donated goods is the privilege and responsibility of the donor. A Valuation Guide of acceptable goods will be supplied upon request to the clinic. Contributions are deductible for income tax proposes to the extent allowed by law. Donors who will require St. Luke's to execute a Form 8283–"Non-cash Charitable Contribution"– are required to complete and present such form for execution at the time of the donation.

HAVE YOU REMEMBERED THE ST. LUKE'S FREE MEDICAL CLINIC IN YOUR WILL?

St. Luke's Free Medical Clinic is a 501(c)3 Tax Exempt Organization

162 North Dean Street Spartanburg, South Carolina 29302

Phone (864) 542-2273 Fax (864) 597-0413 Email:

Website:

! THANK YOU FOR YOUR DONATION !

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Address:				
			<u>.</u>	
	City		State	Zip Code
Phone:		Fax:		
E-mail:				

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Noncash Charitable Contributions

 Attach to your tax return if you claimed a total deduction of over \$500 for all contributed property.
 See separate instructions. OMB No. 1545-0908

Attachment Sequence No. **155**

Identifying number

	tion A. Donated items (o	Property of \$5 r groups of simil	, 000 or Less an ar items) for wh	d Certa	tin Publ	icly Traded a deductio	Sec n of	k return instructions. surities—List in this se \$5,000 or less. Also,	
Par		traded securities							
1	1 (a) Name and address of the donee organization					onated vehicle, er	nter the	tion of donated property year, make, model, condition, a form 1098-C if required.)	nd mileage,
Α									
В									
С									
D									
Е									
Note	. If the amount you	u claimed as a ded	uction for an item i	is \$500 o	r less, yo	u do not have	e to co	omplete columns (d), (e),	and (f).
	(c) Date of the contribution	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor		or's cost ted basis	(g) Fair market (see instruction		(h) Method used to dete the fair market valu	
B C									
D									
Е									
Par 2a	entire inte contributio	erest in a proper on listed in Part I	ty listed in Part ; also attach the	I. Com required	plete line statem	es 3a throug ent (see inst	gh 3 ructi	ugh 2e if you gave les c if conditions were pl ons). htire interest }	aced on a
		o more than one pr							
b	Total amount cla	imed as a deducti	ion for the proper	ty listed			-		
С		s of each organiza ganization above):		such con		(2) For any p was made in a		tax years } r year (complete only if di	
	Name of charitable org	o ,	·						
	Address (number, stree	et, and room or suite no.)						
	City or town, state, and	ZIP code							
d e	 d For tangible property, enter the place where the property is located or kept } e Name of any person, other than the donee organization, having actual possession of the property } 								
3a	-		• •			•		ispose of the donated	Yes No
	Did you give to ar organization in co the property, inclu to designate the p	nyone (other than poperative fundraisi uding the right to v	the donee organizing) the right to the right to the ote donated secunation income, possess	zation or e income rities, to sion, or ri	another from the acquire to ght to acc	organization donated prop he property b quire?	partic perty by pur	ipating with the donee or to the possession of chase or otherwise, or	
		n Act Notice, see se				Cat. No. 62299.	J	Form 8283 (I	Rev. 12-2006)

Form	8283 (Rev. 12-200	6)										Page 2
Name	e(s) shown on your i	ncome tax return									Identifying number	ər
	items secur	Property Over \$5) for which you clain ities reported in Se	ned a deductio ction A). An ap	on of m oprais	nore ti sal is g	han \$5,0 generally	00 per item / required f	or gro for pro	oup (except contrib operty listed in Sec	utions (of certain publicl see instructions	y traded
Pâi	it Infor	mation on Don	ated Proper	rty—	·lob	e comp	pleted by	the ta	axpayer and/or	the ap	praiser.	
4	Art* (contrib	that describes the ty oution of \$20,000 or r ution of less than \$2 **	nore)	donat		ther Real	conservatior Estate Property	n Conti	ribution		Equipment Securities Other	
other **Coll	similar objects. ectibles include coi	culptures, watercolors, ns, stamps, books, gem s, you must attach a c	s, jewelry, sports	memo	rabilia,	dolls, etc.	, but not art a	s define		nuscripts	s, historical memoral	oilia, and
5		of donated property (if) , attach a separate state		(b) If					t brief summary of the o at the time of the gift	overall	(c) Appraised market valu	
Α												
В												
C D												<u> </u>
D										See in	structions	
<u> </u>	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's adjusted		r		oargain sales, ount received		(h) Amount claimed deduction		(i) Average trading price of securities	
A B												<u> </u>
C												+
D												
Pa	a val	ayer (Donor) St ue of \$500 or les	<u>s. See instru</u>	uction	ns.					·		
		owing item(s) include tifying letter from Pa						-		ised val	ue of not more th	an \$500
0:												
	ature of taxpaye	aration of Appr	aisor						D	ate }		
-		donor, the donee, a pa		tioniny	whicht	hedonora	cauired the r	vropert		tedtoan	voftheforegoing	
marri	ed to any person w	ho is related to any of th ax year for other pers	eforegoingperso									
appra value the poresult me to Sig	aisal, Iam qualified . Furthermore, I und enalty under section ting from the appraion the penalty under n	d myself out to the pub to make appraisals of th Jerstand that a false or i in 6701 (a) (aiding and a isal of the value of the pi section 6695A. I affirm	ne type of propert raudulent oversta abetting the under operty that I know	ybeing atemer erstate w,orre	gvalue nt of the ment c asona	d. I certify e property of tax liabili bly should	that the appra value as deso ity). In additic I know, would	aisalfe cribed i on, l un d be use	es were notbased on a n the qualified appraisa derstand that a substa ed in connection with a	percent al or this intial or g return or	age of the appraised Form 8283 may sub ross valuation miss claim for refund, ma	d property ject me to statement ay subject
	Here Signature } Title } Date }											
Busin	Business address (including room or suite no.) Identifying number									۶r		
City o	r town, state, and Z	IP code										
Pai	rt IV Done	e Acknowledgi	ment—To b	e coi	mple	ted by t	the charit	able	organization.			
	0	zationacknowledge bove on the following	•	ifiedo	rganiz	zationung	dersection 1	170(c)	andthatitreceivedtl	hedona _	tedpropertyasde	escribed
portio	on thereof) within	anization affirms that 3 years after the dat gment does not repre	e of receipt, it v	will file	Form	8282 , D	onee Inform	nation I				
Doe	s the organizatio	n intend to use the p	property for an	unrela	atedu	se?					Yes	🗌 No
	e of charitable orgar								cation number			

City or town, state, and ZIP code

Date

Title

Address (number, street, and room or suite no.)

Authorized signature