



GIFT OF GRAIN DONATION FORM

A contribution of _____ bushels of _____ (type of grain) from the _____ (year) harvest will be donated to the Frankfort Community Foundation (FCF). 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 _____ (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 Frankfort Community Foundation, P.O. Box 1127, Manhattan, KS 66505. Donor requests that proceeds from the sale of the grain, less selling expenses, be used for (check one):

☐ FCF Community Grants Fund for area of greatest need, or

☐ Other _____
(For a complete list of funds at FCF visit frankfortcf.org)

Donor understands this gift of grain will be subject to the Foundation's gift acceptance policies. FCF publishes donor names (no gift amounts) on the foundation website.

If you wish to remain anonymous please check here: _____

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

Address: _____ City, ST: _____

Phone #: _____ Email Address: _____

Donor

Date

Donor

Date

This portion to be completed by FCF:

Receipt of Pledge:

Frankfort Community Foundation
P.O. Box 1127, Manhattan, KS 66505

Date P.O.

Questions? Call (785)292-4433, email info@frankfortcf.org, or foundation@mcfks.org