

NORTHWESTERN INDIANA REGIONAL PLANNING COMMISSION

DOCUMENTATION OF IN-KIND CONTRIBUTIONS

Name: _____ Signature: _____
Project: _____

I Certify the information provided herein to be true and correct.

Meeting Attendance:

Date:	Meeting Description:	Hours:	Rate:	Valuation:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Other Time Contributions

Date(s):	Description:	Hours:	Rate:	Valuation:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Non-Time Contributions

Description:	Valuation:
_____	_____
_____	_____
_____	_____