

## Olympic Educational Service District 114 105 National Avenue North, Bremerton, Washington 98312

(360) 478-6887 • 1-800-201-1300 • FAX (360) 405-5808



In- Kind Contribution for November\_\_\_\_\_\_ through October\_\_\_\_\_\_ Partner\_

Salaries & Benefits In-Kind

Actual Position Title & Description of Service	Pay/Source Please include level, step of total salary, & name of salary document please attach document.	# of Hours or % of Salary	Amount of Salary claimed as In-Kind	Related Benefits (Include benefit rate if applicable)	Total In-Kind Contribution
	Amount of pay: Level, Step				
	Amount of pay: Level, Step				
	Amount of Pay Level, Step				
	Amount of pay Level, Step				
Total "Salaries & Benefits In-Kind"					



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Other In-Kind Match

Description	Please show all steps of In-Kind contribution, what calculation is based on or how it was valued and provide a copy of document source	Please show all steps of calculation of In- Kind contribution, what calculation is based on or how it was valued and provide a copy of document source	Amount of In- Kind
Total other In-Kind Match			
Grand Total In-Kind Contribution			

Authorized Signature

Date

**Olympic ESD** 

Date

Early Childhood Education August 2016 Partner In-Kind