

Gift In Kind Donation Form

DONOR INFORMATION:

Name as you would like to be recognized: _____

Contact (If other than donor): _____ Phone: _____ Fax: _____

Address: _____ E-mail: _____

City/State: _____ Zip: _____

GIFT INFORMATION:

Description of donated item:

Restrictions or conditions that may apply to donated item:

Gift Certificate Attached Expiration date: (If unspecified, 1 year after purchase)

Instructions re: Delivery / Pickup of Donation (Indicate location / date / time):

REQUIRED INFORMATION:

* Donor's Estimate of Value * \$

Signature: _____ **Date:** _____

The fine print: The Santa Rosa Junior College Foundation is a nonprofit organization under section 501 (c)(3) of the Internal Revenue code; therefore, your donation may be tax deductible as allowable by law. Tax ID #94-1735861 * **Guidelines established by the IRS do not permit us to provide you with an estimated value of your contribution. PLEASE RETAIN A COPY OF THIS COMPLETED FORM FOR YOUR RECORDS.** Thanks you for your gift.

*Complete information, print form, sign & date, and return to the Foundation for processing.
Print an additional form to retain for your records.*