



# Donation Form



Date \_\_\_\_\_

Campus/Organization Receiving Donation \_\_\_\_\_

Person Accepting Donation \_\_\_\_\_

## DONOR INFORMATION

Business/Individual \_\_\_\_\_

Contact Person \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

*Street/P.O. Box*

*City*

*Zip*

## TYPE OF DONATION

**IN-KIND DONATION (GOODS/SERVICES)**

Goods/Services Donated \_\_\_\_\_

Market Value of Goods/Services \_\_\_\_\_ *(must be determined by donor)*

**MONETARY DONATION/GIFT CARD(S)**

**Giftcard** - Quantity: \_\_\_\_\_ Amount of each: \_\_\_\_\_ **Monetary Donation** - Check #: \_\_\_\_\_ Amount: \_\_\_\_\_

Specific request on how donation will be spent \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## FOR USE BY CAMPUS/ORGANIZATION AND COMMUNITY RELATIONS DEPARTMENT

Department/Campus Receiving Donation: \_\_\_\_\_

BISD Employee: \_\_\_\_\_ Date: \_\_\_\_\_

**Tax ID#: 74 6000230**

*All donation forms should be turned into the Community Relations Department by the last school day of each month.*

*If you are the campus/organization receiving a donation, please forward copies to the following:*

**Community Relations Department**

**Donor**

**Business Office**

**Campus/Organization**