Los Angeles County Alliance
for
BOYS & GIRLS CLUBS

IN--KIND DONATION FORM

Event: **Date of Event:**

Description of Item (include quantities):

Estimated Fair Market Value: Donation: $ Auction: $

Fair market value of any goods or services given to donor in return: $

Individual donor or company name:

Name of person to be thanked:

Organization Name:

Address:

City: **State:** **Zip:**

Phone:

Email:

Approved: _____ **Date:**

IRS 501(c)3 Tax Exempt Number: 46--5058473