



IRS 501(C)3 TAX EXEMPT # 26-38889828
 IN-KIND DONATION FORM

DONATION INFORMATION

Event: Starry Night Date of event: September 13, 2024

Description of item(s) (including quantities):

Estimated fair market value:\$ _____ Donation: _____ Auction: _____

Fair Market Value of any goods or services given to donor in return (if any):\$ _____

Individual donor and/or company name: _____

Name of person to be thanked: _____

CONTACT INFORMATION

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

CONFIRMATION INFORMATION

Item to be (check one): _____ Mailed _____ Delivered _____ Other _____

Date Recieved: _____ IBPF Representative/Contact _____

APPROVAL: _____ DATE: _____