

**IN KIND DONATION FORM
ISSAQUAH HIGH SCHOOL PTSA 2.6.45
EFFECTIVE 11/15/05**

PLEASE FILL OUT AND RETURN TO THE TREASURER.

COMMITTEE/PROCURER: _____

COMMITTEE CHAIR: _____

DONOR NAME: _____

DATE OF DONATION: _____

IN KIND DONATION ITEMS/SERVICES: _____

IN KIND DONATION VALUE: _____

(Please attach receipt if applicable)

PLEASE TEAR OFF AND GIVE BOTTOM PORTION TO DONOR

IN KIND DONATION RECEIPT FOR DONOR

RECIPIENT: ISSAQUAH HIGH SCHOOL PTSA 2.6.45

DATE: _____

DONOR NAME: _____

IN KIND DONATION ITEMS/SERVICES: _____

IN KIND DONATION VALUE: _____

(Value set by donor. The IRS does not allow IHS PTSA to set values of donated items)

Thank you!

The IHS PTSA is a 501(c)3 nonprofit organization. Your contribution is tax deductible as allowed by law. No goods or services were provided for this gift. Please save this receipt as no other receipt may be forwarded. EIN _____.