

## Blue Mountain Community College PO Box 100 Pendleton, OR 97801

## IN-KIND GIFT DONATION FORM AND RECEIPT

## Please get the following information from the donor.

Donor	r Name/Business Name:	
Addre	ess:	
	state Zip:Phone:	
Descri	iption of proposed in-kind donation ( <i>Please be specific</i> ):	
Specia	al directions or information concerning above donation ( <i>Please be sp</i>	pecific):
Total Estimated Value: \$ (As established by donor.)		r.)
Donor Signature:		Date:
donat	ratement: No goods or services have been received in exchange for a ion may be tax deductible; please check with your accountant or tax ted you will receive a copy of this form for your records.  To be completed by Department accepting	advisor. If your in-kind gift is
Depart	tment contacted concerning ability to use dor	ation dated
	Accepted Rejected by Departmen	t
IF ACC	EPTED, department please sign and date:	
	Physically Accepted by College by:	Date:
	Service is Accepted by College by:	Date:
	To be completed by President's offi	ce
	Thank you letter sent to Donor by President	Date:
	Original form and copy of donor letter forwarded to the Finance Departr inventory system.	nent to record donation into fixed asset  Date:
IF REJE	ECTED	
	Letter sent to Donor by President thanking them, but refusing item/servi	ce. Date: