



IRS 501(c)(3) – Tax ID 87-0439582

IN-KIND DONATION FORM

Date: _____

Donor Information:

Company/Organization Name _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Donation Purpose:

☐ School use (list school or program name): _____

☐ Districtwide use

Donation Description (Include brand name/model if applicable): _____

I declare the value (fair market) of above item(s) at: \$ _____

Donor signature: _____

For vehicle donations only:

VIN # _____ Odometer Reading _____

Donor Social Security or Federal ID # _____

Please return this form to:

Washington County School District Foundation

121 W. Tabernacle Street

St. George, UT 84770

435-986-5151 (Phone)

Diane.tyler@washk12.org