

NON CASH DONATION FORM

PART 1: DONOR INFORMATION

| | | |
|----------------------------------|------------|---|
| Last Name | First Name | Must be completed by donor for receipt and IRS purposes. For automotive donations, please contact the Automotive Department at (360) 596-5320. |
| Company Name (if corporate gift) | | |
| Complete Mailing Address | | |
| Email | Phone | |

PART 2: DONATION DESCRIPTION

| Quantity | Item / Description <small>(Please be specific: number, brand, model - the description will appear on the receipt. Attach additional page(s) if necessary, or include information on back of this page.)</small> | Stated Value | |
|--|--|--------------|---|
| | <input type="checkbox"/> Service <input type="checkbox"/> Asset | | * Total Value determined by: <input type="checkbox"/> Donor estimate <input type="checkbox"/> 3 rd party appraisal <input type="checkbox"/> Fair market value *Gifts valued at or over \$5,000 will need a certified 3 rd party appraisal for donor's tax purposes. |
| | <input type="checkbox"/> Service <input type="checkbox"/> Asset | | |
| Purpose: <input checked="" type="checkbox"/> To be Used by Specific Program/Class/Office/Event: _____ Party w/ a Purpose in support of LGBTQQ+ & Ally Scholarship (A7190) | | Total Value* | |

PART 3: Signatures

| DONOR | COLLEGE |
|---|---|
| The undersigned, on behalf of the Donor, hereby assign, transfer, and set over unto the SPSCC Foundation, all of the Donor's rights, title, and interest in and to the abovementioned property. By my signature below, I certify that the property transferred is free from any liens, encumbrances, and/or defects in title. | I (college representative) have seen the item(s) donated or can otherwise verify the accuracy of the donor description; certify the applicability of this donation for the purpose for which it is being given to the Foundation/College, and that it will not burden either with unacceptable liabilities. |
| Signature of Donor | Signature of College Representative |
| Date | Date |

Please give this form to the college representative accepting your gift at the time it is donated. You will receive a receipt from the SPSCC Foundation in the mail. Thank you for your gift!

For Foundation Use Only

| | |
|--|--|
| <input type="checkbox"/> Transfer to College/Program (name of program, if applicable): | Signature of Foundation Representative |
| <input type="checkbox"/> Keep in Foundation Inventory | Date Signed |

SPSCC Foundation is a non-profit 501(c)3 organization under section 170 of the IRS code. No goods or services have been provided as a condition of this gift.