

Portland Public Schools Foundation

a division of **all hands raised**



PPSF In-kind Donation Form

Questions: Contact Rosemary Schwimmer at rosemary@allhandsraised.org, 503-234-5404

***School Name and Event:** _____

| Item Type | Item Name | Fair Market Value |
|---|-----------|-------------------|
| <input type="checkbox"/> Merchandise | | \$ |
| <input type="checkbox"/> Gift Certificate/Service | | \$ |
| <input type="checkbox"/> Cash or Other | | \$ |

The donation:

Enclosed or attached

Will be mailed or delivered by (date): _____

Needs to be picked up by (date, location): _____

Donation Description: *Please provide a complete description. Include quantity, size, color etc.*

Donation Parameters: *Please note any restrictions, dates, limitations, location, special instructions and all other pertinent conditions.*

| | | | |
|---|------|-------|---------------|
| Donor Name | | | Donor Phone |
| Contact Name <i>(if different than above)</i> | | | Contact Phone |
| Address | City | State | Zip |
| Email Address | | | |
| Donor Signature and Date: | | | |

Thank you for your support! Tax ID 93-1149789