

# DONATION/IN-KIND DONATION FORM



**Team/Account:** \_\_\_\_\_

*PLEASE PRINT/TYPE.*

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***DONATION IS RESTRICTED FOR USE BY PANTHER CREEK ATHLETIC BOOSTER CLUB OR BY THE TEAM/GROUP INDICATED BELOW.***

**TEAM** (if applicable): \_\_\_\_\_

**DONOR** Name (First and Last Name): \_\_\_\_\_

Donor Company/Organization (if applicable): \_\_\_\_\_

Donor Contact Information (email and/or phone number): \_\_\_\_\_

Donor State Value of Gift: \$ \_\_\_\_\_

Date Gift was Received: \_\_\_\_\_

Description/Purpose of Gift: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**AD Approval:** \_\_\_\_\_

*(AD must approve BEFORE gift  
gift has been received)*

Signature

Printed Name

Date

**AND:**

**Coach Verification:** \_\_\_\_\_

*(Coach signs AFTER receiving;  
verifies all information above is correct)*

Signature

Printed Name

Date

**\*\*\*ORIGINAL SIGNED FORM MUST BE GIVEN TO ATHLETIC DIRECTOR AND SAVED/FILED WITH PCABC TREASURER.**

Coach or athletic director shall provide donor a copy of this form for tax purposes. If donor needs different form of tax receipt, please advise.