

IMAGINE! IN-KIND DONATIONS RECORD

Name of Imagine! employee receiving donation _____ Department _____

Item(s) donated _____

Date of donation _____ Estimated Value _____

Donor contact name _____ Title _____

Donor company/organization name (if any) _____

Donor address _____
Street City State Zip

Donor phone _____ Fax _____ Email _____

Is this something your department would have had to purchase? Yes _____ No _____

Comments (something special about the donation, some reference you want made in the thank you, etc.)

Please send form to Susan LaHoda (Imagine! mailbox at Lafayette office, fax: 303-665-2648, email: slahoda@imaginecolorado.org). Include any paperwork (invoice, accompanying note, etc.). Data will be recorded and a thank you sent. The Imagine! employee receiving the donation will be sent a copy of the thank you for the department's records.