



Vehicle Donation Form

Name: _____ Phone Number: _____

Address: _____

Year / Make / Model of vehicle: _____

VIN: _____

Fair Market Value of vehicle: _____

NADA or Kelley Blue Book value is sufficient. If value exceeds \$5,000, please include an official appraisal.

Location of vehicle: _____

Any known problems with the vehicle: _____

We appreciate any maintenance records that are available to be provided with the vehicle at the time of pick up. *Thank you for supporting Drala Mountain Center in this very valuable way. We will contact you soon regarding the donation of your vehicle.*

Drala Mountain Center is a Colorado 501 (c) 3 nonprofit corporation.

Tax ID Number (FEIN): 84-1535130

If you have questions, please contact our Development Office at:

970-881-2184 x382

donorservices@dralamountain.org