

GIFT IN-KIND ACCEPTANCE FORM

DONOR INFORMATION

NAME: _____

ADDRESS: _____

STREET ADDRESS, CITY, STATE & ZIP-CODE

EMAIL ADDRESS: _____

PHONE: _____

GIFT INFORMATION

DESCRIPTION OF GIFT: _____

PROPOSED USE OF GIFT: _____

VALUE OF GIFT: _____

DEPARTMENT/DIVISION TO USE AND KEEP INVENTORY OF GIFT: _____

FOUNDATION CERTIFICATION

Foundation Official Signature (X) _____ Date: _____