



## GIFT REPORTING FORM

### PERSON RECEIVING GIFT

Name: \_\_\_\_\_

Title: \_\_\_\_\_

SSN: \_\_\_\_\_ M#: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### DESCRIPTION OF GIFT

Date of Gift: \_\_\_\_\_

Cost of Gift: \$ \_\_\_\_\_

Reason for Gift: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### UNIVERSITY APPROVAL

Sources of Monies Used (Indicate University or Foundation Account Title and Number)

\_\_\_\_\_

Person Giving Gift \_\_\_\_\_ Date: \_\_\_\_\_

Department Head Approval \_\_\_\_\_ Date: \_\_\_\_\_

Dean Approval (When appropriate) \_\_\_\_\_ Date: \_\_\_\_\_

Vice-President Approval \_\_\_\_\_ Date: \_\_\_\_\_