

Please fill out this form completely for each gift received by your department. Forward form and gift (check/credit card information etc.) or description of equipment or property) to University Advancement, B01 University Administration Building, Box 19198. If you have questions, call ext. 2-2584 for assistance. For additional instructions - see *Gifts to the University* GA-IA-PR2.

Solicited by: 	Form of Gift <input type="checkbox"/> Cash/Check/Credit Card <input type="checkbox"/> Equipment Gift-in-Kind <input type="checkbox"/> Other Gift-in-Kind	Department Receiving Gift:
Cost Center (six digits) or Project Number (10 digits): 		Submitted by:
Cost Center Name: 		Ext.:
Gift Amount/Gift Value: \$		Box #:
<input type="checkbox"/> Gift is anonymous	Check No.:	Check Date:
Purpose: <input type="checkbox"/> Library <input type="checkbox"/> Student Scholarship <input type="checkbox"/> Academic Division <input type="checkbox"/> Endowment <input type="checkbox"/> Athletics <input type="checkbox"/> Research <input type="checkbox"/> Capital Purposes <input type="checkbox"/> Faculty/Staff Compensation <input type="checkbox"/> Operation & Maintenance of Physical Plant <input type="checkbox"/> Public Service & Extension <input type="checkbox"/> Other	Credit Card No.:	
	Credit Type:	Exp. Date (MM/YYYY):
Donor Name (Company, Organization, or Individual): 	<i>Complete this section for Gift-in-Kind</i> Date Gift-in-Kind Received: Description of Gift-in-Kind: <input type="checkbox"/> Supporting documentation attached	
Donor Contact (If Company or Organization) and Title: 	<i>Complete this section for Honor/Memorial gifts</i> Gift in Honor of Gift in Memory of Name & Address of Honoree or Family for notification of gift:	
Donor Address: 		
Donor Status (Check all that apply): <input type="checkbox"/> Alumnus/Alumna <input type="checkbox"/> Other Individual <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Parent (Current Student) <input type="checkbox"/> Student (Currently enrolled) <input type="checkbox"/> Company <input type="checkbox"/> Foundation <input type="checkbox"/> Other Organization	Special Instructions/Additional Information: 	
Solicitation Method <input type="checkbox"/> Development Personal <input type="checkbox"/> Department Personal <input type="checkbox"/> Dean Solicited <input type="checkbox"/> Development Mailing <input type="checkbox"/> Department Mailing <input type="checkbox"/> Donor Initiated		

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