GIFT-IN-KIND ACCEPTANCE FORM

•	In-kind gifts of \$100 or more to WCSU or the WCSU Foundation must be reported to Institutional Advancement immediately upon receipt using this form.	Institutional Advancement Office Use Only
•	Never include estimated cash value of the gift in any acknowledgement letter to donor. Please review the Gift-in-Kind Acceptance Checklist	
	(see reverse) prior to completing this form.	

1) DONOR INFO	DRMATION:	2) RELATIONSHIP TO UNIVERSITY:		
Donor		□ ALUM	□FACULTY/STAFF	
Company Contact			CORP/CORP FDN	
Title				
Address				
Phone	() Ext			

3) GIFT INFORMATION:

Describe the gift indicating the quantity, model number, manufacturer, etc., and whether it needs space, additional support, material and/or service to operate. (Attach a separate sheet if necessary)

4) GIFT VALUE:

Estimated \$_____ Written documentation from donor establishing the value of the gift must be attached. All gifts from individuals valued more than \$5,000 must include an appraisal.

5) VALUATION METHOD (Check one):	6) GIFT RESTRICTIONS (Check one):		
Appraisal	Donor stipulations or limitations		
□ Itemized inventory list	(Attach donor statement on detail of stipulation or limitation)		
□ Vendor/Donor documentation (invoice, letter)	□ Gift to be retained and used for designated purpose		
Published value (catalog, etc.)	□ *Gift may be sold, proceeds used for designated purpose		
 If value not provided by donor, then value determined By a qualified expert on the faculty or staff (Donation will be recorded at \$1) \$ (Not to exceed \$5,000) 	 *Gift will be sold and proceeds used for:		
.7) DONEE OF GIFT (Check one):	8) DESIGNATED FOR (Check one):		
University – FEIN 06-0775515	Department:		
Foundation – FEIN 06-1086725	College:		
	□ Other:		

9) CAMPUS INFORMATION						
Campus Location of prop	perty: Gift Needs to be TAGGED					
Name(s) of gift solicitor(s	s) if available:					
+Name of Dean:	+Dean's Signature:					
Contact person for quest	tions on this form: Title or Dept.:					
Extension:	Date Submitted:					
+Printed Name and Signature are Required						
Gift received by: Name - Department - Extension (Please print) Date gift received						
	Name - Department - Extension (Please print) Date gift receive	/eu				
Approved by:	Department Head Signature / Club Advisor (Sign and print name) Date approved	1				
	College Dean or Development Officer Signature Date approved	1				
Send completed form and accompanying documents to: Institutional Advancement, University Hall – Room 106 Official tax receipt for each gift of \$250 and above will be sent to the donor by the WCSU Foundation office.						
Acceptance Authorizati	V.P. Administration & Finance or WCSU Foundation Treasurer Signature Date accepted					
	ACCEPTANCE FORM CHECKLIST					
 Please be certa 	tain that all nine sections of the form are complete and that the appropriate names and	signatures				

Attach all documentation supporting the acceptance of this gift.

are in place.

- In the Gift Restrictions section, the SSN (Social Security Number) or the TIN (Taxpayer Identification Number) must be included for individuals who have contributed gifts-in-kind valued more than \$5,000 that may or will be sold.
- In the Donee of Gift section, be certain that the appropriate donee of gift has been checked.
 - The University (the state) is the donee for gifts of equipment that will be used to enhance the education of the students on the campus and for gifts-in-kind that will directly benefit the University.
 - The Foundation is the donee for gifts of equipment that will be used for the enterprise ventures on the campus, and for gifts-in-kind contributed with the understanding that the gift would be sold.
- In the supporting documentation, please include sufficient information about the gift to make it clear why the University or Foundation was selected as the donee. If you have questions regarding the appropriate donee for a particular gift, please contact the Office of Institutional Advancement at ext. 78479.