



Gifts-in-Kind to the Ragin' Cajun Athletic Department

Staff Member in Contact with Donor: _____ Phone: _____

Complete Description of Item(s) to be Donated: _____

Valuation of gift(s) is the privilege and responsibility of the donor. The property is estimated by the donor to have a value of \$_____. (The University gives no surety regarding value or tax deductibility of donated item(s). Donors should consult personal financial or tax advisors.)

Gift Donated to: _____

Name of Donor: _____ Phone: _____

Address: _____

Donor Signature: _____ Date: _____

Approvals

Please check one box:

I fully concur in University acceptance of the above described gift(s). It is of significant value to my department and the cost/benefit ration is reasonable.

It is the opinion of this department that the proposed gift(s) is of limited value but should be accepted to promote donor relations.

This gift is of no value to my department and should be disregarded/refused.

Staff Member Signature: _____ Date: _____

Athletic Director Signature: _____ Date: _____