Student Organizations

Gifts in Kind Acceptance Form

For reporting gifts of personal property

Student Organization Name:	
Student Organization Account Number:	Date:
Donor Company:	Phone:
Contact:	E-mail:
Address:	
City, State, Zip:	
Gift Description:	
	Estimated Value: \$
Organization Authorized Signer:	
Organization Advisor:	
Received by:	
I	FOR A.S. ACCOUNTING OFFICE USE ONLY
Original File Date:	