

Gifts-In-Kind Form

Please return this to:

SFA Office of Development
Austin Building Suite 303
Box 6092, SFA Station

Department Name: _____

Acct. Name: _____ **Acct. #:** _____

Gift Description: _____

Value of Gift: \$ _____

*Please provide documentation of the value.

Include for ALL Gifts:

A copy of any correspondence related to the gift

Donor Name: _____

Address: _____

Phone Number: _____

Contact Name, if Business donation: _____

This form was completed by

Printed Name: _____

Phone Number: _____

Signature: _____

Date: _____