

CAMPUS GIFT ACCEPTANCE REPORT

UDEV 100-3 (R10/04) 71461-257

**Gift Administration Use Only**

AIS Batch # _____

AIS Entity # _____

AIS Receipt/Gift # _____

1. DONOR NAME (Last, First, Middle Initial)			DaFIS DOCUMENT #	
2. ADDRESS OF DONOR (Street, City, State, Zip Code or Country)			5. DONOR REQUESTS CONFIDENTIALITY <input type="checkbox"/> Yes <input type="checkbox"/> No	
			6. BENEFITING SCHOOL/COLLEGE/OTHER	
			7. DEPARTMENT NAME	
3. DEPOSIT PREPARED BY	Phone No. (X-XXXX)	DEPOSIT AMOUNT		8. FORM OF ACKNOWLEDGEMENT <input type="checkbox"/> Letter <input type="checkbox"/> Card <input type="checkbox"/> Receipt
9. DONOR INSTRUCTIONS/WISHES (As stated by Donor) DESCRIPTION OF PROPERTY (If Gift In Kind)				
<h1>SAMPLE</h1>				
9a. TYPE OF USE <input type="checkbox"/> Endowed Use <input type="checkbox"/> Current Use		9b. SOURCE OF GIFT FEE <input type="checkbox"/> Gift-Deduct fee from the gift <input type="checkbox"/> Donor- The donor contributed an additional 6% to cover fee <input type="checkbox"/> Discretionary - The Dean/Vice Chancellor has elected to pay the fee from the following discretionary account DaFIS Account\$ _____ Dean/Vice Chancellors Signature _____ <input type="checkbox"/> Earnings- or gifts of \$100,000 or more. Approval letter Signed by Vice Chancellor, University Relations attached. <input type="checkbox"/> No Fee - Chancellor's approval exception - An exemption letter signed by the Chancellor attached.		
10. DATE RECEIVED	11. GIFT PLEDGED	12. GIFT RECEIVED	13. GIFT-IN-KIND (VALUE)	GIK ESTABLISHED BY <input type="checkbox"/> Donor <input type="checkbox"/> Dept. <input type="checkbox"/> Other
14. DEPARTMENTAL INSTRUCTIONS TO EXTRAMURAL ACCOUNTING FUND NAME:			15. LEGACY ACCTOUNT/FUND NO: DaFIS ACCT. NO.	
16. FORM PREPARED BY/CONTACT PERSON (Type Name)			DEPARTMENT & PHONE NO.	DATE
17. SUBMITTED FOR ACCEPTANCE BY (Type Name/Signature)			TITLE	DATE
18. ATTACHED 700U IF DONOR SPECIFIED PI OR RESEARCH PROJECT DIRECT QUESTIONS TO OFFICE OF RESEARCH				
UNIVERSITY RELATIONS (TO OR) <input type="checkbox"/> GIFT <input type="checkbox"/> 700U DATE:		OFFICE OF RESEARCH (TO UR) <input type="checkbox"/> GIFT <input type="checkbox"/> NOT GIFT DATE: INITIALS:		
ACCEPTANCE BY (Type Name/Signature) Melissa Ivanusich			TITLE Gift Administration, Manager	ACCEPTANCE DATE
OFFICE OF RECORD				