



University Gift Processing

#### Notification of Gift Form

Date: 8/13/15 Full Name of Person Preparing this Form:

Date of Gift:  Campus Box #:  Phone #: **Receipt To:**

###### Donor Information

Advance ID#: Donor Name:

(*If donor is an organization, indicate the primary contact person below*)

|  |  |
| --- | --- |
| Contact Name: | Street: |
| Contact Title: | City: |
| Phone #: | State:  Zip Code:  **E-mail:** |

Gifts of Cash

**Description:**

This section must be completed for all cash gifts deposited to a University Gift Account.

**For proper recording and tax receipt preparation, please include a copy of the check, deposit slip, & all**

**supporting documentation received with the gift of cash.** In order to comply with Federal law, the

followinginformation must be provided.

Amount:  FAS# and Object Code:

Date of Gift:  Departmental Contact:

Date of Deposit:  College/Department

or Foundation Receiving Gift:

**Purpose/Use of Gift:**

Please indicate the purpose or use of the gift:

If other, please specify:

### Gifts of Property

**Description:**

This section must be completed for all non-cash gifts received for NC State or any of its affiliated foundations.

**For proper recording and tax receipt preparation, please include a copy of the appraisal & all**

**Supporting documentation received with the gift of property.** In order to comply with Federal law, the

following information must be provided.

General description of the property received:

Value of Gifts:  Value Determined By:

College/Department

or Foundation Receiving Gift:

For auditing purposes, include physical location of property and how it will be used:

Receipt Information

**Description:**

**In order to comply with Federal law, the following information must be provided:**

Did the donor receive anything in exchange for their gift?  Yes No

(If yes above) Of what fair market value was the benefit received by the donor?

Gift Assessment Information

**Description:**

**If checked, signature below is required prior to submitting form to Alumni & Donor Records:**

One time exemption from gift assessment

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice Chancellor for University Advancement Date