

Dahlonega, GA 30533-0027

## **Gift In Kind Contribution Form**

Date:	RE#:	
Donor Information:		
Donor Name		
Organization (if applicable)		
Address		
City		
Daytime phone	FAX	
Gift Information:		
Fund Designation:		
Gift Description:		
Estimated fair market value \$ (Clause: Any gift over \$500 will require a	valid invoice. If not, the gi	ft description will be used.)
Notes		
Solicitor Signature:		
Foundation Approval:		
Please return this form to:		
University of North Georgia Foundation, Inc. P.O. Box 1599		Phone: 706-864-1546 Fax: 706-864-1649

This form does not serve as a receipt for this contribution, but is intended for our internal record keeping purposes only. A receipt describing the items or merchandise donated will be mailed to the address supplied above. The University of North Georgia Foundation is unable to include the estimated value on the donor receipt. It is the responsibility of the donor to substantiate the fair market value for his/her own tax purposes. The donation of services, although very valuable and much appreciated, is generally not considered tax deductible by the IRS. Please consult with your tax advisor to determine the tax implications of a gift.