

The University of Texas at Dallas Office of Development and Alumni Relations Gift-In-Kind Acceptance Form

Date									
School/Unit			olicitor			Completed by:			
			mail						
Is the gift benefiting more than one school/unit		t `	Yes No	D					
If yes, please list units and the	eir contact persons								
Donor Information	Mr. Ms.	Mrs.	Dr.	Mr. & Mrs.	Dr. & Mrs.	. Drs.			
Donor's Name/Org					ContactName				
Address					City, State,Zip				
Phone Number					Country				
					Email Address				
Gift Information		o		Equipment					
Type of In-Kind G		Art or Collection Intellectual Property/Patent				Other Discount on Purchase (in excess of the standard "education discount")			
			rty/r atent	Software	Discount	on i urchase (in exces	s of the standard		i discount j
Description of C									
Benefit to Univers									
Where will item reside on cam	pus								
Value of	Gift								
Condition of	Gift New	Good	Poor	Unknown	N/A S	ource of Valuation	Internal	Donor	Appraiser
Special Storage Requiremer	nts? Yes	No	lf yes, please	e explain					
Hazardous Concer	ns? Yes	s No If yes, please explain							
Delivery Concer	ns? Yes								
Donor Restrictions on	gift Yes	No							
Additional Cost Associa	ted Yes	No	If yes, please	e explain					
Additional comments/informat	ion								
Gift Acceptance									
I recommend acceptance	of this by The Ur	niversity of	Texas at Da	llas					
Dean's Signature					Dat	e			
UTD Official Acceptance	D	Date Date							
	n, along with sup	oport docu	mentation*,	, should be sc		ailed to gifts@utda ould be directed to			he
						d value as stated by ppraisal is required.			

Cost Center Number

Gift Services Use Only

Cost Center Name

All fields completed

All required documents included

For Internal Use Only