

GIFT-IN-KIND ACCEPTANCE FORM

Supporting Documentation for Gifts-in-Kind	FOR FSU FOUNDATION OFFICE USE
 Attach documentation from donor conveying the gift to FSU Attach valuation method of gift (see below) 	DONOR ID:
3. Gift agreement (if value \$25K or more)	D.O./MANAGER:
 Signatures from College/Dept. stating desire to have gift & being possession of the gift (see bottom section on this form) 	In ————————————————————————————————————
Never include estimated value of gift in any acknowledgment letter to	, ,
DONOR INFORMATION:	RELATIONSHIP TO UNIVERSITY:
Donor:	☐ Alumna/Alumni ☐ Parent
Contact:	☐ Faculty/Staff
Title:	Friend
Address:	☐ Corporation/Foundation ☐ FSU Foundation
	
Phone:	
SS# (if donating a boat, plane or other motor vehicle):	
GIFT INFORMATION:	
Describe the gift indicating the quantity, model number, manufacturer, etc., and whether it needs space, additional support, material and/or service to	
operate. Attach a separate sheet if necessary. (If giving a vehicle, please note the make, model, year and any other ID.)	
VALUATION METHOD MUST BE CHECKED:	GIFT RESTRICTIONS (Check one):
Value: \$	☐ Donor stipulations/limitations (Attach donor explanation in details)
Valuation method: ☐ Appraisal needed if over \$5,000 per IRS (donor to provide)	☐ Gift to be retained and used for designated purpose☐ Gift may be sold, proceeds used for designated purpose
☐ Itemized inventory list	Gift will be sold and proceeds used for:
☐ Vendor/Donor documentation (invoice letter)☐ Published value (catalog, etc.)	
☐ Value not provided by donor; determined by qualified faculty/staff expert	
DESIGNATED FOR (Check one):	FSU FOUNDATION FUND DESIGNATION:
Department:	☐ Fund:
College:	Fund:
Other:	Fund: * Soft credit will be applied to this fund. It does not provide cash value to the fund.
Signatures below indicate being in possession of the gift and the depart	
Gift Received By: Name (print):	
Signature:	
Gift Approved By: Dean/VP Signature:	
Acceptance Authorization: CFO / FSU Foundation Signature:	
Gifts of \$100,000+ Development Officer (if applicable):	Date:
to Exceptional D.O. Manager:	Data
i ians communee 1	Date:
Vice President for Development:	Date:
Vice President for Development:	

Hoover, Assistant Director, Gift Processing, at jhoover@foundation.fsu.edu.

Date: