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**Business Affairs Office**

**Donation Receipt Request Form 2013-2014**

**This form is to be used by student organizations that are receiving donations/gifts in kind from a local business. Upon receipt of this completed form, the Business Affairs Office will generate a Letter of Receipt that can be given to the business for its records/use.**

Campus:  Klamath Falls  Wilsonville Today’s Date:

|  |  |
| --- | --- |
| **Contact information for donation:** |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Company/Donor Name: | | | |  | |  | | |  |
| Address: | |  | | | |  | | |  |
| City: |  | | State: | |  | | Zip Code: |  | |

**Type of Donation (check all that apply):**

Goods (physical items)  Services  Gift Card

**Description of donated item(s):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| Total value of donated item(s): | | $ | |  |  | |
| Date Received: |  | |  | |  | |

Purpose/intended use of donated item(s):

|  |
| --- |
|  |

Received by:

(Printed name):

(Signature):

Date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Department/Club Name:  Contact Name for Department/Club: | | | | |
| Email: |  | Phone: |  |
|  | | | | |

Thank you for your generous support!