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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!