

HVAAC Gift-in-Kind Transmittal Form

General Information

1. Donor (Name & Address) _____

2. Has Gift Been Acknowledged? Yes__ No__
3. Recipient of Gift (Team): _____ 4. PAC Rep or contact name: _____
5. Gift (Description of item): _____

Equipment Information

If the Gift is Equipment, Please Complete the Following Information.

1. Name of Manufacturer
2. Manufacturer's Serial No. Model No.
3. Estimated Value (FOR INVENTORY/INSURANCE PURPOSES ONLY):\$ _____
4. Location of Equipment (if known at this time) Bldg. Room
5. Contact Person (for Inventory Purposes)
6. Gift Will be Used For: Sport ____ Instruction ____ Other (Specify) _____

Clearances

1. Does the gift require any action involving Space, Remodeling, or Construction? Yes__ No__
If yes, attach appropriate form(s) with a description and cost estimate.
2. Has action been taken to indicate clearly that acceptance of the gift does not constitute HVAAC endorsement of the product? Not Applicable ____ Yes__ No__
3. Does the gift have any contingencies attached to it? Yes__ No__

Signatures

1. _____ Date
Individual or Corporate Donor
2. _____ Date
Treasurer Approval
3. _____ Date
President Approval
4. _____ Date
Principal or Athletic Director