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LAREI	GE

## LAREDO COLLEGE PROPERTY INVENTORY DONATION FORM

Name of Donor:							D/	ATE	/		/	
ADDRESS:						DEPARTMENT RECEIVING DONATION						
CITY, STATE, ZIP						DEPARTMEN	NT NAME:					
TELEPHONE NUMBER						EMPLOY	EE NAME:					
NAME OF DONORS CONTACT: (If applicable)						EMPLOY	ee title:					
TELEPHONE NUMBER						TELEPHON	IE NUMBER					
		ASSET	REING		νάτει	<u>ר</u>						
ASSET BEING DON												
DESCRIPTION CONDITION OF ASS				I OF ASS		***(see below)						
	worth \$5000.00 or more, the don	or must obtain a j	formal appr	aisal from	a qualified	appraiser,	per IRS pub	lication 561	"Determinin	g the Vo	alue of	
Donated Property". Goods and Services provided in	exchange for the contribution:											
No goo	ds or services were provided by LC	C in return for the o	contribution	).								
	tion and good faith estimate of th				pturn for the	contributio	n.					
		le goous of service	e that LC pro	videu ili re	ium jor ine	contributio						
Descrip	tion:											
Source of Gift (check one):												
Alumni/Friend		Faculty/Staff	:			Corpo	ration/Busir	ness				
Other Source												
Source of Gift (check one):												
Check Academic		ipment/Furniture ulty & Staff Compe										
Public Service		perty or Building										
Library		eration & Mainten	nance of Phy	sical Plant								
Endownment and Sir Other :	nilar FundsUnrestricted Inco	me										
Other .												
Does the donat	ion require operation and mainte	enance cost?		YES	NO							
If yes, what organization will cover the cost?					Į			Telephone Number				
Donor's Signature:												
	*****President	must approve all	donations b	oefore beir	ng received	by departm	ent****					
President Signature:								DATE:				
Property Inventory Manager Signature:					DATE:							
Department Employee Signature:						DATE:						
		Prop	perty Inve	entory l	Jse							
PTAG # Assigned to equ	uipment/Furniture				E	Banner Date	e:					
FUND ACCOUNT:					•			·				
BANNER UPDATE BY:												