

Gift-in-Kind Form



To be completed by an Office of Advancement Representative

Development Contact & Beneficiary Information

Development Representative Name: _____

Development Representative Email/Phone: _____

This is a gift to Baton Rouge Community College

This is a gift to the Baton Rouge Community College Foundation

Responsible Division/Program: _____ Responsible Department: _____

Immediate or Recurring Expenditures Required to Accept and Maintain Gift: _____

Account Number: _____ Account Name: _____

Donor Information

Individual/Company Name: _____

Contact Person Name (for Companies only): _____

Address: _____

Phone Number: _____ Email Address: _____

Please write how the donor name should appear in any recognition: _____

Anonymous Gift No Public Recognition Raiser's Edge ID # _____

Gift Information

Gift Description: Describe the donation, including type/name of item, number of items, model, or serial numbers.

Date Gift Received: _____

Gift Intent: Inventory & Utilize Sell & Liquidate

Gift Location and Useful Life: _____

Fair Market Value: _____

Donor Recognition Credit Legal Credit

*Please attach supporting documentation and/or qualified appraisal

College Approval

Development Representative: _____ Date: _____

By signing this form, the Development Officer confirms Dean and Department Head acknowledgment and authorization of gift in kind.

BRCC Vice Chancellor for Advancement/ Foundation Executive Director: _____ Date: _____

Act of Donation, if applicable

Please check the appropriate boxes below to indicate which offices will be required to review:

BRCC Vice Chancellor or Chancellor: _____ Date: _____

BRCC CIO (hardware): _____ Date: _____

Supervisor: _____ Date: _____

Other (Name & Signature): _____ Date: _____

Foundation Services Routing - Internal Use Only

Office of Financial Services/ Facilities Date Sent: _____

Date of Gift Entry in Raiser's Edge: _____