



Cadets of the Ole War Skule
LSU Military Museum

Donation

NOTICE OF GIFT TO LSU

AS522

Donor: _____

Address: _____

Phone: _____

Cell Phone: _____

Email: _____

Type of Contribution

<input type="checkbox"/> Cash Contribution	\$ _____
<input type="checkbox"/> Non-Cash Contribution *	\$ (Fair Market Value)
<input type="checkbox"/> In-Kind Contribution*	\$ (Fair Market Value)

LSU Account # _____

*Description

Equipment

Software

Other

Purpose of Gift (Describe how this item will be used by LSU)

Please check one:

I certify that nothing of value was provided to the Contributor in return for this contribution.

Something of value was provided to the Contributor. The dollar value and a brief description must be denoted below.

Note: Please attach a copy of the appraisal or other valuation support, a copy of the acknowledgement letter sent to the donor, and any other available supporting documentation.

Preparer

Printed Name

Date

Department Head

Printed Name

Date

Department

FOR ACCOUNTING SERVICES USE ONLY

Amount Deposited: _____

Date: _____

Account #: _____

Processed by: _____