



# Non-Cash/Gift-In-Kind Form



ACHIEVING THE DREAM

## Donor Information

Donor Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

## Donation

I approve the use of my name in a published list of donors.  *Do not* use my name in a published list of donors.

Description of Item (please be as specific as possible or attach detailed inventory):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Value (to be provided by donor): \$ \_\_\_\_\_

Please check one:  Donor statement of value     Appraisal attached     Receipt attached

\_\_\_\_\_  
Donor(s) Signature(s) Date

## Gift Received By

Faculty/Staff Name: \_\_\_\_\_

Department: \_\_\_\_\_ Extension: \_\_\_\_\_

*The College of the Mainland Foundation will provide a receipt and a thank you note to the donor.*

Please return to: College of the Mainland Foundation, 1200 Amburn Rd., Texas City, TX 77591 or fax to (409) 933-8041.  
For more information, please call (409) 933-8508.