



Corsicana ISD Education Foundation

Non-Cash or In-Kind Gifts

Donor Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Donor Signature: _____ Date: _____

Gift Description: _____

Donor Assigned Gift Value: \$ _____

Intended Desitnation and Benefit of Gift given to Foundation: _____

Foundation Responsibilities & Expenses: _____

Donor Recognition Information:

- No, donor would rather gift not be publicized.
- Yes, gift may be publicized.

Gift Value and Appraisal Information

\$ _____

For Foundation Use Only

Gift Acknowledgements Recommended By:

- Executive Director
- Board Member
- CISD
- Other

Other

- IRS Form 8283 attached
- Benefit of District
- Benefit of District through Foundation

Gift Accepted and Acknowledged By:

Executive Director

Date

Board Member

Date

Announced to CEF Board on: _____