

Gift in Kind Library Donation

Donor Name: _____

Mailing address: _____

Telephone: _____ **Email address:** _____

Gift Description		
Author	Title	ISBN/ISSN

Check one:

Acknowledgment letter (no receipt) **or** Tax Receipt and acknowledgment letter

Please indicate:

Book plate Yes No

If the donation is not accepted, please contact me for pickup arrangements. Yes No

I have read the Camosun College Library Gift Policy and understand that this gift is made in accordance with that policy.

Donor's Signature

Date

For Library use:

Name of library staff member accepting donation: _____

Name of librarian completing review of items: _____

Comments:

Librarian completing appraisal: _____

Item(s) valued at: _____

Comments :



For Foundation Office Use:

Tax receipt #: _____

Date receipt produced: _____

Initials: _____