



Gift in Kind

Please complete the following information to ensure we record and acknowledge the gift in-kind donation properly.. Thank you for choosing to make a donation of goods and/or services to Wake Technical Community College.

DONOR INFORMATION:

Date: _____
 Organization (if applicable): _____
 Contact Name: _____
 Address: _____

 Phone: _____
 Email: _____

IN-KIND DONATION:

Brief Description of Donation(s)
(Quantity and Description)

Total Gift \$ Value(s)
(Fair Market Value)

		\$
		\$
		\$
		\$
		\$
		\$
	Total	\$

If gift value is \$1,000 or more, additional documentation is required such as an itemized receipt.

Type of Donation: Goods Service
Condition of Item(s): New Used: Excellent Good Fair

Wake Tech Representative receiving Gift: _____

Program or Department at Wake Tech receiving Gift: _____

Gift Location: Main Northern Health PSEC RTP Western AEC Eastern

Does this gift require WTCC to provide transportation, installation, electrical, plumbing, etc.? Yes No

Has ownership of property been transferred to Wake Tech and Donation been received? Yes No

If you have questions or need assistance in completing this form, please call the Wake Tech Foundation office.

Please return the completed form to:

Wake Tech Foundation
 9101 Fayetteville Road
 Raleigh, NC 27603
 Email: foundation@waketech.edu

Phone: (919)866-6250
 Fax: (919)773-9105
 Tax ID #23-7017752