

# Southern Illinois University Foundation

Colyer Hall – Mail Code 6805  
Carbondale, IL 62901

School of Medicine – Mail Code 9666  
Springfield, IL 62794

## Transmittal Cover Sheet for *Special Event Gift in Kind Form*

Number of attached forms:		Date of Special Event:  _____
Deposit into Unit Number:		

Name of Foundation Unit to be credited:

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I am attesting the items attached have been received and the information listed on the form is correct to the best of my knowledge. I have attached all relevant information associated with this transmittal. No goods and/or services were provided.\* (sign below)

*Hacee Lynne Tobias*

This form completed and signed by

Date

Phone

Mail Code

\* **NOTE:** If goods and/or services were provided, "Contributions with a Non-Tax Deductible Portion Deposit Form" is required.

All gifts must have documentation supporting the value indicated on this form. This documentation includes appraisals, receipt from retail vendor, current price list(s) from manufacturer (including organization's discounts), letters from professionals knowledgeable about the item, etc. The IRS requires donors to have an appraisal on gifts of property or similar items with a value more than \$5,000 in the same calendar year. Donors should seek professional tax advice for the deductibility of their contributions.

### Approvals:

Dean/Director:

Name

Signature

Date

Managing Director:

Name

Signature

Date

### Direct inquires to

Marla Fuller  
(618) 453-4935  
Colyer Hall, Carbondale

Cindy Moreno  
(217) 782-2955  
School of Medicine, Springfield