

**GIFT/DONATION FORM AND TRANSFER OF TITLE**

**Donor Section**

- **DONATION DESCRIPTION:** This description may be used for publicity purposes. Include all pertinent information.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- **SERIAL NUMBER:** \_\_\_\_\_
- **DONOR'S ESTIMATED VALUE OF GIFT:** \_\_\_\_\_  
(No employee/officer of the San Diego Community College District shall estimate the value of the gift.)
- The donor acknowledges that the San Diego Community College District reserves the right to sell or otherwise dispose of this/these item(s) in whole or in its component parts, at the sole discretion of the San Diego Community College District. The Donor further acknowledges that full title and ownership is turned over to the San Diego Community College District, by signing below.
- **DONOR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_
- **DONOR NAME, ADDRESS, AND TELEPHONE NUMBER:** \_\_\_\_\_  
\_\_\_\_\_

**ACCEPTANCE REQUESTED BY**

- **ORIGINATOR :** \_\_\_\_\_ **DATE:** \_\_\_\_\_
- **REQUEST FOR SERVICE #:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(If equipment needs installation or repair the site shall attach RS.)
- **DIR OF ADMINISTRATIVE SVC:** \_\_\_\_\_ **DATE:** \_\_\_\_\_
- **RESPONSIBLE MANAGER:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Vice President, Dean or other District Management staff)  
It is expected that the Program Manager will send a copy of this form along with a thank you letter to the donor.
- **RESPONSIBLE ADMINISTRATOR :** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(President, Vice Chancellor)

**FACILITIES SERVICES SECTION**

- **Related Costs or Needs Associated with Gift of Equipment:**
  - a) Installations Costs: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_
  - b) Restoration Costs: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_
  - c) Relocation Costs: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_
  - d) On-going Maintenance Costs: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_
  - e) Additional Costs: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_
  - f) Comments/Explanation: \_\_\_\_\_  
\_\_\_\_\_
- **Acceptance:** Recommended: \_\_\_\_\_ Not Recommended: \_\_\_\_\_
- Vice Chancellor, Facilities Services Approval: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ **NO DISTRICT MAINTENANCE**

**ACKNOWLEDGEMENT OF CONTRIBUTION TO  
SAN DIEGO COMMUNITY COLLEGE DISTRICT**

1) Donor (include name, address, and telephone number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) Amount of cash or check contributed: \_\_\_\_\_

3) Description (but not estimate of value) of property (other than cash) contributed: \_\_\_\_\_  
\_\_\_\_\_

4) Date of receipt of contribution: \_\_\_\_\_

5) \_\_\_\_\_ The San Diego Community College District did not provide any goods or services in consideration, in whole or in part, for the cash or property contributed.

6) \_\_\_\_\_ The San Diego Community College District did provide goods and/or services in consideration, in whole or in part, for the cash or property contributed.

a) Description of goods and/or services provided by San Diego Community College District in consideration for the cash or property contributed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

b) Good faith estimate of the value of goods and/or services provided by San Diego Community College District: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned officer of the San Diego Community College District hereby acknowledges the contribution by Donor and provides the information stated above for Federal income tax purposes.

\_\_\_\_\_  
Responsible Administrator  
San Diego Community College District