

Campus Address: KU Endowment, West Campus Mailing Address: P.O. Box 928, Lawrence, KS 66044-0928 Phone: 785-832-7400 FAX: 785-832-7492

## GIFT/DEPOSIT TRANSMITTAL

Date of Transmittal:		Contact Name:
Univ. Dept. or Org:		Phone Number:
Account Name:	Number:	Contact Email:
These Items are:	☐ Contributions	(Tax-deductible items)
(Check ONE)	☐ Other Deposits	(Non tax-deductible items. Describe specific purpose and justification below. Please refer to Sec. 4.1 of the KU Endowment Fund Administration & Use Handbook to determine appropriateness of directing non-contribution deposits to KU Endowment.)
Will this contribution provid	le funding to a researcher	, or a family member of a researcher, who has a financial or business relationship
with the donor?	☐ YES	□NO
Explanation of Deposit:		
Donasit Ameunty Charles	Cach:	Total Checks + Cash:

## **DEPOSIT INSTRUCTIONS**

- · Contributions and Other Deposits should be on separate deposit forms, unless checks include both contribution and premium.
- Premium values (coffee mugs, t-shirts, tickets, etc.) should be deducted from amount of contribution.
- All checks must be properly endorsed. Unendorsed checks will be returned to the department/organization transmitter.
- Include all supporting documentation from the donor with the deposit. This includes: envelope and letter from the donor, membership application (if applicable) and any other information that will assist in accurate recording of the contribution.
- · Include donor's name and complete address if it does not appear on the check or accompanying materials.

## **ITEMIZATION INSTRUCTIONS**

 $\bullet \ \, \text{All checks accompanying this form must be listed below. Attach additional pages if necessary. } \\$ 

Donor/Payor Name(s) Address (if not on attached materials) Contribution Amount Other Amount