

Gift-In-Kind Donation Form

Please send back the completed form to the below address
THIS IS A FILLABLE FORM OR PLEASE PRINT VERY CLEARLY

Date: _____

DONOR INFORMATION	
Donor name:	
Organization (if applicable):	
Phone:	Email:
Address:	

GIFT (DONATION) INFORMATION	
Gift description:	
Quantity:	Serial Number:
Gift value: If above \$1,000.00 please attach third-party independent appraisal	Amount: \$
Gift Purpose:	<input type="checkbox"/> Educational <input type="checkbox"/> Other
Donor permission to use gift for non-educational purposes:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Donor permission to liquidate asset in future if it can no longer be used by CGA and our students:	<input type="checkbox"/> Yes <input type="checkbox"/> No

TAX RECEIPT*	
Tax receipt request:	<input type="checkbox"/> Yes <input type="checkbox"/> No
*CGA accepts gifts and gifts-in-kind in accordance with the Canada Income Tax Act and in accordance with internal policy.	

SIGNATURES	
Donor Signature:	Date (mm/dd/yy):
CGA Signature:	Date (mm/dd/yy):

Receipts will be issued on the last day of the month the In-Kind donation was received. Income tax receipts will be given for donations \$100.00 CDN and over If you have any questions please contact the CGA. Charity registration #10807-5250-RR0001

