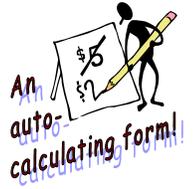


Purpose

This Foundation deposit form is to accompany all cash, check and credit card items received which are part contribution/part fee or items that are connected to an event.

Instructions

1. Complete and forward to the SIU Foundation.
2. Attach copies of all information sent with revenue item.
3. "Fair Market Value Received per Participant" should be the same as indicated on the previously submitted Foundation Event Approval Form or the fair market value of goods and/or services received.



	Column 1	Column 2 X	Column 3	=	Column 4	Column 1 - Column 4
Payor/Donor	Total Amt. Paid	Number of Participants	Fair Mkt Value Received Per Participant		Total Non-Deductible Portion	Amount of Contribution
Totals						

Name of event or activity	Department	Account Number
Special Instructions:		

I am attesting all information above is accurate to the best of my knowledge. I have attached all relevant information associated with this deposit. (sign below)

This form completed and signed by _____ date _____ phone _____

FOR FOUNDATION USE ONLY

account number	contribution allocation	fee designation
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>