Gift Form
Sul Ross State University

Date Received: _______________________

Donor Information
(First and Last Name, and title if a Sul Ross State University employee)

Donor Name: __________________________________________

Mailing Address: ______________________________________

Phone Number or Email Address: _________________________

Address		City		State		Zip

Items Received: Include Titles, Author(s), Year, and type (Book, Media, Other)

☐ Book  ☐ Media  ☐ Other

☐ Book  ☐ Media  ☐ Other

☐ Book  ☐ Media  ☐ Other

☐ Book  ☐ Media  ☐ Other

☐ Book  ☐ Media  ☐ Other

☐ Book  ☐ Media  ☐ Other

Gift Policy
The Bryan Wildenthal Memorial Library accepts donated books and other materials from individuals and organizations but reserves the right to accept or reject materials according to the Collection Development Policy. **There shall be no restrictions on disposal of unwanted items.**

The Library cannot provide a statement of the value of gift items for income tax deductions or other purposes.

My signature shows that I understand and agree to the above terms of this gift donation:

Signature: ___________________________________________ Date: _______________________

Thank you for your donation to the Bryan Wildenthal Memorial Library!
Gift Form
Sul Ross State University

For Staff use only:

Receiver: ____________________________________________

Description:

Number of items donated: __________________________________

General Stacks or Reference:

Total: ________________  (Hard Copy ________ or Paperback ________)

Children’s Books:

Total: ________________  (Hard Copy ________ or Paperback ________)

Media and/or Other:

Total: ________________  (DVD ____________ or Other ____________)

Condition of Items: Include a brief statement and your name.

Content Notes:

Disposition (if necessary):