

## DONOR INFORMATION

Donor Name/Organization:

Contact Name:

Address:

City, State, Zip Code:

Phone:

Email Address:

**OFFICE OF ADVANCEMENT  
ALASKA PACIFIC UNIVERSITY  
4101 University Drive  
Anchorage, AK 99508**

**Tel: (907)564-8346**

**Email: advancement  
@alaskapacific.edu**

## ITEM INFORMATION

	ITEM	DESCRIPTION	FAIR MARKET VALUE
ITEM #1			
ITEM #2			
ITEM #3			

## ITEM DONATION

- I will send or drop off my donation to the address on this form before April 15, 2023
- I am located in the Anchorage Area and would like my donation item picked up.
- The item is located at
- and will be ready for pick-up (Date/Time):
- Artwork Donation:** Please complete the Artwork Donation Form accompanying this form if you are donating a painting, photo, sculpture, mixed media, or other artwork.

DONOR SIGNATURE

DATE

*By signing this document, I confirm the values of the donation(s) stated above reflect(s) the fair market value of the donation(s) to the best of my knowledge. Thank you for this tax-deductible contribution (Tax ID # 92-0023588). Please keep a copy of this document for your records.*