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Donor's Information

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Purpose: _____	Amount \$ _____	Check# _____ In-kind _____ (Please select)
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The Donor acknowledges that:

1. The listed donation is made freely and voluntarily without intent to limit in any way the commitment of the University of Puerto Rico at Mayagüez to the principles of academic freedom and that they are, in no way, in opposition to the Law of the US Federal Government or Puerto Rico or any applicable regulation of the University. The listed donation is not made in support of an external product or service and there is no known conflict of interest between the parties.
2. The University of Puerto Rico (UPR) is a public higher education institution. Donations made to UPR are tax deductible by donors, under section 170(b)(1)(A) and 170(b)(1)(A)(v) of the US Government Internal Revenue Code, if made for public purposes. UPR is eligible to receive tax deductible charitable contributions under section 170(c) of the US Government Internal Revenue Code. Donors will have the right to claim federal tax deductions, subject to certain limitations, if donations are made according to the applicable code dispositions.

Donor's representative name: _____

Donor's representative signature: _____

For the purpose of accountability, the *name* and *email* of the UPRM employee certifying this donation and its purpose is: _____

Please send this form with your check payable to UPRM, by mail to:

Chancellor's Office
UPR -Mayagüez
Box 9000
Mayagüez, PR 00681

****For more information please contact: Carmen P. Parés, carmenp.pares@upr.edu****

Antes, ahora y siempre... ¡COLEGIO!

For Official Use Only (UPRM)

Applicant's Office _____

Information of the Donation:

Date of Letter of Approval _____ Identification # _____

Amount of Donation Received: \$ _____ Date: _____

Deposited in Account number: _____

Chancellor's Office

Approved by Chancellor: _____ Date: _____

Sent to Dept. of Finances by: _____ Date: _____

Department of Finances

Deposit #: _____

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