ALUMNI ASSOCIATION

Donation Property Custody Receipt

Receipt Number: _____

This is to acknowledge receipt of the items listed below by the Wisconsin State Patrol Alumni Association from:

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home: _____ Cell: _____ Work: _____ Fax: _____

Email: _____ Website _____

The above-named donor attests that they have full legal authority to make a donation of the items below to the Wisconsin State Patrol Alumni Association and further the donor understands that all donations are irrevocable, and the Wisconsin State Patrol Alumni Association becomes legal owner of the donated items upon receipt.

Items Donated and Description:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Use reverse side if more space is needed

I understand that my donation is unconditional, and the Wisconsin State Patrol Alumni Association reserves the right to display, store, lend, sell, or otherwise dispose of all donations as deemed appropriate by the Wisconsin State Patrol Alumni Association Board of Directors or their designee.

Print Name:_____

Signature:_____ Date:_____

Received By:

Print Name:_____

Signature:_____ Date:_____

Items and descriptions continued