Renaissance

# Contribution Information Form

## TANGIBLE PERSONAL PROPERTY

**This form must be completed, signed by the Donor(s) and returned to Gift Administration Services Inc., 6100 W. 96th St., Suite 100, Indianapolis, IN 46278.**

**Name of Trust Contributing to:**

**Date of Contribution*: / /**

## Basis Information for Property "1"

Description of Property:

Original Acquisition Date: / / Cost Basis: $

Fair Market Value on Date of Contribution: $

Depreciation Claimed: $ Depreciation Recapture: $

## Basis Information for Property "2"

Description of Property:

Original Acquisition Date: / / Cost Basis: $

Fair Market Value on Date of Contribution: $

Depreciation Claimed: $ Depreciation Recapture: $

## Basis Information for Property "3"

Description of Property:

Original Acquisition Date: / / Cost Basis: $

Fair Market Value on Date of Contribution: $

Depreciation Claimed: $ Depreciation Recapture: $

*I (we) certify that this information is true and correct to the best of my (our) knowledge and belief.*

| Signature of Donor | Printed Name | Date |
|---|---|---|
| Signature of Donor | Printed Name | Date |

*The date the asset is unconditionally delivered to the trustee within the meaning of Reg. §1.170A-1(b). Please provide proof of delivery.

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