MSUM Gift Reconciliation Form

(For ALL gift card purchases and/or gift items valued at $25.00 (each) or more, i.e. iPad's, iPod's, etc.)

Event: _____ ***Event Date(s):***_____

Responsible Person: _____

To be completed by MSUM Employee:					***To be completed by each Gift Recipient:***	
D=Donation P=Purchase	***Payment Method *PO # *P Card -*** *Cardholder Name* ****Check Request (CR)-*** *Name/Vendor* ****Emp. Exp. Report (EER)-*** *Employee Name*	***Gift Item***	***Amount***	**Recipient's Name** PLEASE PRINT	**Recipient's Phone Number** PLEASE PRINT	**Recipient's Signature/Date**
(Example) P	***EER - John Smith***	***Sweatshirt***	***$50.00***	***Sally Johnson***	***218.111.2222***	

Submit completed Gift Reconciliation Form and approved Special Expense Form to the Business Office within 1 week of the event. You may want to keep a copy for your records. The submitted forms will remain on file in the Business Office for audit purposes.

Rev. 9/2015