

State of Arizona

Arizona Department of Environmental Quality Employee Recognition Program Donation Acknowledgment and Receipt

*Name of Donor or Donor Agent:		
*Organization Name, If Applicable:		
Street Address:		
City, State and Zip Code:		
Phone:	Fax: ()	
Donor's Federal Tax Identification Number:		
*Description of Item(s) Donated:		*(Estimated) Value:
	*Total (Estimated) Value:	
	Terms and Conditions.	
Donor acknowledges that the donations of other the Arizona Department of Environmental Quality E. refundable, carry no time limit or expiration date, h the State of Arizona, in	ent with the Employee Recognition Program of the Arizon an cash may be sold for a profit or otherwise disposed of imployee Recognition Program. Donations are accepted wave been freely given, and that their acceptance creates its agencies, divisions or departments or agents and empl	or utilized in a manner consistant with the with the understanding that they are non- no corresponding obligation on the part of
*Signature of Receiving Employee:		
*Printed Name of Receiving Employee:		
*Title	ADEQ Employee Recognition Fund Treasurer	
*Date		

In the event that the source of the donated items or funds is a fund raising event sponsored by State Employeees or State Agencies, only those items preceded by an asterisk(*) need be completed