



*In Kind Travel Gifts*

Name

\_\_\_\_\_ *(please print your preferred title [Dr., Mr., Mrs., Ms., other] and name)* \_\_\_\_\_ *Class year*

Address

\_\_\_\_\_

City, State, Zip

\_\_\_\_\_

Phone, E-mail

\_\_\_\_\_

Joint Recognition

I want to share recognition for this gift with my spouse/partner:

\_\_\_\_\_ *(please print spouse's/partner's preferred title and name)* \_\_\_\_\_ *Class year*

Auto Travel

1) Personal vehicle: \_\_\_\_\_ miles x \$.14 (current rate for charitable deduction) = \$ \_\_\_\_\_

2) Rental car. *(if applicable)*

Company name: \_\_\_\_\_ \$ \_\_\_\_\_

Gas 1: \_\_\_\_\_ \$ \_\_\_\_\_

Gas 2: \_\_\_\_\_ \$ \_\_\_\_\_

Gas 3: \_\_\_\_\_ \$ \_\_\_\_\_

Air Travel

1) \_\_\_\_\_ \$ \_\_\_\_\_

2) \_\_\_\_\_ \$ \_\_\_\_\_

Other Travel

1) \_\_\_\_\_ \$ \_\_\_\_\_

2) \_\_\_\_\_ \$ \_\_\_\_\_

Additional Expenses

*Company and Purpose (parking, shuttle, road toll, ferry toll)*

1) \_\_\_\_\_ \$ \_\_\_\_\_

2) \_\_\_\_\_ \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

Gift Details

Original receipts attached *(required)*.

Event/Purpose \_\_\_\_\_ *Date* \_\_\_\_\_

Department/Office \_\_\_\_\_

Contact person \_\_\_\_\_

Signature \_\_\_\_\_

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\* In Kind Travel Gifts are Pioneer Fund gifts that must be accounted for with the annual budget of the office with which you are working. Your receipt will say "Travel Expenses" and the sum of your gift will be included in your total gift to the College as acknowledged in the *Honor Roll of Giving*.

Must be submitted by mail to include original receipts.