

Instructions for Handling and Documenting Cash and Other Donations

Once your event is approved, you will be required to collect all donations in accordance with the following instructions:

Cash

- a. Please record the names and addresses of anyone who should receive a thank you/tax letter from Arkansas Children's Foundation. Please see next page for sample Cash/Credit Gift Acknowledgement form.
- b. Two people should count any cash received. The count should occur immediately following the event.
- c. Record the total number and amount of cash donations on the Event Donation Summary Form.
- d. Please do not mail cash. Before remitting the funds raised, please convert all cash into a cashier's check or money order.

Checks

- a. Checks should be endorsed upon receipt:
FOR DEPOSIT ONLY
ARKANSAS CHILDREN'S FOUNDATION
Please note that this step must be accomplished in order to make the checks non-negotiable.
- b. Two people should count all checks received. The count should occur immediately following the event.
- c. Record the total number and amount of checks on the Event Donation Summary Form.

Other Donations

- a. Please record the names and address of anyone who should receive a thank you letter from Arkansas Children's Foundation for in-kind donations.

Event Donation Summary Form

- a. Each person counting shall sign the Event Donation Summary Form (attached) to acknowledge verification of the number and total amount of cash, checks, and other types of donations received.
- b. Ensure all donations are summarized by the pay type and totaled on the Form.
- c. Complete all other sections of the Form and remit to the Foundation along with all funds raised.



Cash/Credit Gift Acknowledgement

Donor Name: _____
Company/Organization Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number Work: _____ Home: _____
Date: _____ Amount of Gift: \$ _____
Event: _____
CC# _____ exp date: _____
Name on Card: _____ 3 Digit Sec. No: _____



Cash/Credit Gift Acknowledgement

Donor Name: _____
Company/Organization Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number Work: _____ Home: _____
Date: _____ Amount of Gift: \$ _____
Event: _____
CC# _____ exp date: _____
Name on Card: _____ 3 Digit Sec. No: _____
