

University of Arkansas at Pine Bluff

Value of Equipment Donated by a Third Party

Award Name:					
Award Account Number:					
Donor(s)					

Date of Donation	Type & Size of Equipment	Total Hours of Use	Hourly Rate	Value of Donation	Signature of Equipment Operator

Total Value of Donation _____

Name of Verifying Official

Verifying Official's Signature

Title of Verifying Official

Date