

UNIVERSITY OF HAWAI'I ENDOWMENT ACCOUNT

Permanent file coversheet

** Please submit a completed copy of this coversheet and the endowment's conveying instrument to the General Accounting & Loan Collection Office**

NAME OF FUND: _____

DONOR'S NAME & ADDRESS: _____

PURPOSE OF GIFT: _____

- Check one:**
- | | |
|---|---|
| <input type="checkbox"/> Academic Support
<input type="checkbox"/> Faculty/Staff Compensation
<input type="checkbox"/> Physical Plant
<input type="checkbox"/> Research
<input type="checkbox"/> Training | <input type="checkbox"/> Student Aid – Scholarships based on academic performance
<input type="checkbox"/> Student Aid – Scholarships based on financial need
<input type="checkbox"/> Student Aid – Other
<input type="checkbox"/> Other: _____ |
|---|---|

TYPE OF ENDOWMENT (check one): Permanent Term Quasi

TYPE OF RESTRICTION (check one): Restricted Unrestricted

TERMS OF GIFT:

- | | |
|--|--|
| <input type="checkbox"/> Annual accounting to donor required
<input type="checkbox"/> Principal may be used if income is not sufficient
<input type="checkbox"/> Unused income is added to principal
<input type="checkbox"/> Award/distribution per year _____ | <input type="checkbox"/> Principal to remain intact
<input type="checkbox"/> Income is added to principal until _____
<input type="checkbox"/> Income need not be spent every year
<input type="checkbox"/> Other (describe): _____ |
|--|--|

DESCRIPTION OF GIFT:

DATE					AMOUNT/MARKET VALUE
_____	<input type="checkbox"/> Cash/Check	<input type="checkbox"/> Securities	<input type="checkbox"/> Real Property	<input type="checkbox"/> Personal Property	_____
_____	<input type="checkbox"/> Cash/Check	<input type="checkbox"/> Securities	<input type="checkbox"/> Real Property	<input type="checkbox"/> Personal Property	_____
_____	<input type="checkbox"/> Cash/Check	<input type="checkbox"/> Securities	<input type="checkbox"/> Real Property	<input type="checkbox"/> Personal Property	_____
_____	<input type="checkbox"/> Cash/Check	<input type="checkbox"/> Securities	<input type="checkbox"/> Real Property	<input type="checkbox"/> Personal Property	_____

PRIMARY FISCAL OFFICER:

F.O. Number	F.O. Name	Department	Phone
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SPENDING ACCOUNT CODE(S):

Campus	Account Code	F.O. Number	F.O. Name	Department	Phone
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____