



## Gift, Prize or Award Verification Form

**Instructions:** This form needs to be completed if the recipient is a ULV employee or the recipient is not a ULV employee and the value of the gift or prize is greater than \$25.00.

Recipient Name: \_\_\_\_\_  
(please print)

Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security Number: \_\_\_ - \_\_\_ - \_\_\_\_\_ Telephone Number:(\_\_\_\_)\_\_\_\_\_

**Check only one of the following that applies to you.**

\_\_\_ ULV Employee \_\_\_ ULV Student Worker \_\_\_ Non ULV Employee or Student Worker.

I acknowledge that I am the recipient of a gift or prize from the University of La Verne and that the above information is correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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### For Department/Club use only

Dept./Club Name: \_\_\_\_\_

Program Number: \_\_\_\_\_  
(8 digit department or club account number)

Name of Event: \_\_\_\_\_

Reason for gift or prize: \_\_\_\_\_  
(door prize, participation incentive, token thank you, etc.)

Type of gift or prize: \_\_\_\_\_ Value \$ \_\_\_\_\_  
(gift card, gift certificate, tickets, etc.)

\_\_\_\_\_  
Dept./Club Advisor Signature

\_\_\_\_\_  
Date

**Submit this form with all reimbursement requests to the Accounts Payable Department**