



DOANE UNIVERSITY

Gift of Grain Commitment Form

I/We, _____, hereby gift _____ (# of bushels) of
_____ (type of grain) to Doane University.

Donor Information

Name(s) _____ Class Year(s) _____

Address _____

City _____ State _____ Zip Code _____

Preferred phone (_____) _____ Preferred email _____

I/We would like this gift to remain anonymous.

Gift Designation: Doane Fund Other _____

A checkmark in this box verifies this grain does not have a lien against it; or if the grain does have a lien against it, a lien waiver from the lender is attached.

Signature(s)

Date

Name of grain elevator you will be utilizing for gifting grain to Doane University:

Contact person _____ Phone number _____

If you have any questions about your gift, please contact the Doane University Advancement Office at 402.826.8258.