



**Texas Veterans Land Board**  
 Jerry Patterson, Chairman  
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www.texasveterans.com

## DONATION FORM

### Texas State Veterans Home Resident Benefit Donation Account

I wish to make a gift, grant, or donation to the \_\_\_\_\_ Texas State Veterans Home.  
 As provided by the Natural Resources Code, Section 164.005, the Commissioner of the Texas General Land Office, as the executive of the state agency responsible for the operation of Texas State Veterans Homes (TSVH), may accept gifts to be used for resident welfare and for the support, acquisition, construction, operation, enlargement, improvement, furnishing, or equipping of State Veterans Homes. Donations may be made in the form of U.S. currency, marketable securities, or personal property. **Donations made to the Texas Veterans Land Board for public purposes are tax deductible pursuant to Internal Revenue Code 170(c)(1). The tax identification number for the Texas Veterans Land Board is 74-2463347.** My gift, grant or donation is purely voluntary and I have no expectation of compensation. By making this donation I hereby grant all rights, title and interest in the donated monies or property to the Texas Veterans Land Board.

It is my intention that this gift, grant, or donation be used for the purpose of (check one):

- Welfare, Recreation, Social Events, Patriotic Materials, Memorials, and Monuments.
- Other (*Specify*) \_\_\_\_\_
- General Operations (Used to support the operations of the facilities and obligations of the program.)

I hereby gift, grant, or donate the following (check one):

- U.S. Currency \$ \_\_\_\_\_ (amount)
- Marketable Securities (Type and amount of security and approximate value) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- Personal Property (All donated personal property must be approved by the TSVH Program Director)  
 (Describe and give estimated value) \_\_\_\_\_  
 \_\_\_\_\_

Name of individual, company or organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

Area Code and Telephone Number \_\_\_\_\_

Signature and Title of Donor \_\_\_\_\_ Date \_\_\_\_\_

Signature of On-Site Representative \_\_\_\_\_ Date \_\_\_\_\_

TSVH form 1-1 July 19, 2004

SA: \_\_\_\_\_ Date: \_\_\_\_\_ TSVH: \_\_\_\_\_ Date: \_\_\_\_\_  
 GC: \_\_\_\_\_ Date: \_\_\_\_\_  
 CC: \_\_\_\_\_ Date: \_\_\_\_\_

Date Revised - February 17, 2005