Kingsborough Community College Office of Student Life

Phone: 718.368.5597 - Fax: 718.368.4801

PRIZE AWARD RECEIPT

This form is to be completed by any individuals who receive a prize awarded by Kingsborough Community College prior to redemption of the prize/award.

TO BE COMPLETED BY ISSUING DEPARTMENT/CLUB/ORGANIZATION:
Sponsoring Group (budget line):
Event:Event Date:
Description/purpose of Event:
Prize/Award:
Fair Market Value of Prize/Award:
Notes:
SELECT ONE:
Wagered Event
Cost of Wager (ticket, raffle, etc.): s the amount of the prize, less the wagered amount, greater than \$600? (Circle one) f yes, is the prize 300x the amount wagered? (circle one)
f the fair market value of the prize/award is \$600 or more, less the amount wagered, and 300 times the amount of the wager, a W-2G will be issued. Amounts of prizes/awards must be included in your income as required by law. Your signature below acknowledges the terms of the prize received as described above.
Non Wagered Event
f the prize or award you received is goods or services, you must include the fair market value of the goods or services in your income. A Form 1099-Misc. may be issued to you at year-end, governed by IRS regulations. Your signature below acknowledges the terms of the prize received as described above.
ΓΟ BE COMPLETED BY PRIZE RECIPIENT:
Legal Name:
Address:
Phone Number:EMPL ID #:
certify that the information provided above is correct and that I have received the prize described.
Signature:Date: