

**State of New Jersey  
Department of the Treasury  
Office of Ethics Compliance  
Gift Return Form**



<b>Recipient Name:</b> <input style="width: 95%;" type="text"/>	<b>Merit System Title:</b> <input style="width: 95%;" type="text"/>
<b>Functional Title:</b> <input style="width: 95%;" type="text"/>	<b>Division/Office/Unit:</b> <input style="width: 95%;" type="text"/>
<b>Detailed Description of gift:</b>	<input style="width: 100%; height: 60px;" type="text"/>
<b>Donor Name:</b> <input style="width: 95%;" type="text"/>	<b>Title:</b> <input style="width: 95%;" type="text"/>
<b>Company:</b> <input style="width: 95%;" type="text"/>	<b>Phone:</b> <input style="width: 95%;" type="text"/>
<b>Address:</b>	<input style="width: 100%; height: 40px;" type="text"/>
<b>Reason for gift:</b>	<input style="width: 100%; height: 60px;" type="text"/>
<b>Is the donor an interested party?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

**SIGNATURES**      *(Forward gift and completed form to: Office of Ethics Compliance, PO Box 210, 50 West State Street, 2nd floor, Trenton NJ 08638)*

**1. Gift Recipient**

<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <b>Signature</b>	<b>Date</b> <input style="width: 95%;" type="text"/>
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**2. Ethics Liaison Officer**

<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <b>Signature</b>	<b>Date</b> <input style="width: 95%;" type="text"/>
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**(Office Use Only)**

<b>Disposition:</b> <input style="width: 95%; height: 40px;" type="text"/>	<b>Disposition Date:</b> <input style="width: 95%;" type="text"/>
	<b>Phone Number:</b> <input style="width: 95%;" type="text"/>
<b>Company:</b> <input style="width: 95%;" type="text"/>	
<b>Address:</b>	<input style="width: 100%; height: 60px;" type="text"/>