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| **Foreign Gift Receipt Reporting Worksheet** | | | | |
| **Gift recipient and position:** |  | | | |
| **Foreign government donor name and title:** |  | | | |
| **Date and place of receipt:** |  | | | |
| **Brief statement of circumstances of receipt:** |  | | | |
| **Was the gift given as a souvenir or mark of courtesy?** | **Yes** | | **No** | |
| **Description of gift (include its component parts, if any):** |  | | | |
| **Fair market value (FMV) of gift (U.S. retail FMV):** |  | | | |
| **How was the gift’s fmv established (attach internet printout or other document establishing value)?** |  | | | |
| **Recipient desire:** | **Return the gift:** | **YES** | | **NO** |
| **Personally purchase the gift for FMV:** | **YES** | | **NO** |
| **Display the gift**  **in USAACE HQs or other building on Fort Rucker (official use):** | **YES** | | **NO** |
| **Turn the gift in to service or government services administration:** | **YES** | | **NO** |
| **Donate or transfer the gift to an eligible public or tax-exempt agency**  **(see note 3 below):** | **YES** | | **NO** |
| **Keep the gift**  **(valued under $375.00):** | **YES** | | **NO** |
| **USAACE point of contact name and phone number:** |  | | | |

**Notes:**

**1. Gift must be from a foreign government, not merely a foreign individual. A foreign government is defined as: (1) any unit of foreign governmental authority, including any foreign national, state, local, and municipal government; (2) any international or multinational organization whose membership is composed of any unit of foreign government as described in (1); and (3) any agent or representative of any such organization, while acting as such.**

**2. Determine FMV by finding the item or similar item on a major, U.S. commercial website (e.g., amazon.com, walmart.com, costco.com, etc.), not on an online auction site (e.g., Ebay.com).**

**3. Gift FMVs must be aggregated if given by the same source at the same presentation. Gifts given to a federal employee’s spouse is considered a gift to the employee and must be included in the aggregated FMV.**

**4. Donation requires the gift recipient to prepare a justification letter that includes the donee’s name, mailing address, and phone number, and any special significance of the gift to the proposed donee.**

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| **Supervisor’s Review** | | | | | | | |
| **Name:** |  | | | | **Phone Number:** |  | |
| **I have reviewed this worksheet and I recommend:** | | |  | **approval of acceptance and disposition of this gift.** | | | |
|  | **disapproval of acceptance and disposition of this gift.** | | | |
| **Notes or comments:** | |  | | | | | |
| **Supervisor’s**  **signature:** | |  | | | | **Date:** |  |

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| **Ethic Counselor’s Review** | | | | | | |
| **Name:** |  | | | | | |
| **I have reviewed this worksheet and find that:** | | |  | **Acceptance and disposition of this gift is authorized by applicable regulatory or statutory authority and no further legal review is required.** | | |
|  | **Acceptance and disposition of this gift is NOT authorized by applicable regulatory or statutory authority.** | | |
| **Notes or comments:** | | |  | | | |
| **Ethics counselor’s signature:** | |  | | | **Date:** |  |