## **PLANNED GIFT TRANSMITTAL FORM**

DONOR INFORMATION							
HARD CREDIT	REDIT			ADDRESS			
NAME:		(H):					H):
CRM ID:		(W):					W):
SOFT CREDIT		ADDRESS				Р	PHONE NUMBER
NAME:		(H):				(	H):
CRM ID:		(W):				(	W):
OTHER CONTACT		ADDRESS				Р	PHONE NUMBER
☐ Financial Manager/Attorney		(H):				(	H):
☐Beneficiary Relationship to donor::		(W):				(	W):
NAME / FIRM:							
CDM ID:							
CRM ID:							
□ ANONYMOUS  (Donor's name will not be published or publicly recognized)							
GIFT INFORMATION							
]Revocable <b>]</b> irrevocable							
☐Testamentary Commitment ☐Bequest-Stocks/securities ☐Bequest-Cash ☐Bequest-Property ☐Annuity Trust ☐Charitable Remainder Trust ☐Charitable Gift Annuity ☐ Charitable Lead Trust ☐Life Estate ☐Insurance Premium ☐Retirement Plan							
Amount Solicitation Method Solicitor N		ame	Amount of So	icitor Credit Purpose / Designation			Designation Number
Documentation (required):							
Statement of Intent is attached							
Comments/Details:							
Quid Pro Quo Information:							
Were any goods or benefits given in exchange for this gift? ☐ Yes ☐ No If yes, explain:							
DEPARTMENT/DIVISION INFORMATION							
PREPARED BY TELEPHONE		NUMBER		DATE PREPARED			COLUMNS SOCIETY MEMBER?
							☐ Yes ☐ No
COMMENTS OR ADDITIONAL INFORMATION ON DONOR / GIFT.							