

PLEDGE AND PLANNED GIFT TRANSMITTAL FORM

PLEASE TYPE

Date: _____

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| Donor Name: _____ Donor ID: _____ Address: _____ City/State/Zip: _____ Fund Name: _____ Fund Number: _____ Appeal: _____ Solicitor: _____ Contact Name: _____ Contact Title: _____ Dept Contact: _____ Bldg/Room: _____ Extension: _____ Approval: _____ | Is this gift a tribute (In honor/memory)? Yes No Tribute made for: _____ Tribute ID: _____ Tribute Address: _____ City/State/Zip: _____ If the tribute is in memory of, please provide the following (*): Acknowledgee Name*: _____ Acknowledgee ID*: _____ Address*: _____ City/State/Zip*: _____ Relationship to the departed*: _____ Soft Credit to: _____ Soft Credit ID: _____ Linked Proposal Name: _____ |
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GIFT REVENUE: Description/Comments: *(Attach documentation)*

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| <p>Planned Gift Information</p> PG Calc File Name: _____ *If no PG calc file: *Face Value: _____ Vehicle: _____ Verification: *Revocable? Yes No *Realized? Yes No Anonymous Donor? Yes No Remainder Value: _____ Expected Maturity Year: _____ | <p>Pledge Payment Schedule</p> _____ Amount Pledged _____ # of Payments _____ First Payment Date Payment Frequency: Annually Semi-Annually Quarterly Bimonthly Monthly Semi-Monthly Biweekly Weekly Single Installment Irregular <i>(Specify in comments)</i> Comments: _____ |
|--|--|

 Associate Vice President – Development _____ Date

ADVANCEMENT SERVICES USE ONLY

Received By: _____ Date Received: _____