



Office of University Development

Revenue Transmittal - Cash, Check or Credit Card (no benefits or direct deposits)

Legal Constituent Details:

Full Name: _____ PID: _____
 Address (if new donor or updated info): _____
 Phone: _____ Email: _____

Recognition Credit Details:

Full Name: _____ PID: _____
 Full Name: _____ PID: _____
 Address (if new donor or updated info): _____
 Phone: _____ Email: _____
 Relationship to Legal Donor: _____

Revenue Details:

Check Cash Credit Card (enter # below)

Total Revenue Amount \$ _____ Matching Gift Form Attached Gift is Anonymous

Design (6 digits)	Description	Amount	Appeal Code	Pledge Y/N
		\$		
		\$		
		\$		
		\$		

Prospect Plan Details: If gift is associated with a Prospect Plan, mark the Opportunity **accepted** before submitting.

Plan Name: _____
 Plan Manager: _____ Original Ask Amount: _____

Tribute Details: in memory of in honor of on the occasion of in recognition of

Tributee Name: _____ PID: _____
 Address (if new or updated info): _____
 Acknowledgee: _____ PID: _____
 Address (if new or updated info): _____
 Relationship to Tributee: _____

Submitted by: _____ School/Unit _____

Phone: _____ Email: _____ Date: _____

Comments/Notes: _____

Credit Card Information:

Name as it appears on Card: _____
 Card type: VISA M/Card AmEx Last 4-CC digits: _____ Exp Date: _____
 Card Number: (must be entered by hand) _____

Please send deposit in a locked bank bag to University Development at 208 West Franklin Street with a copy of the transmittal and any related documentation.