

KETTERING UNIVERSITY GIFT FORM



Date:

Attach any pertinent documentation.

Contact Person and Phone:

Donor Name (and ID, if known):

- Soft Credit, if any:

Amount of Gift:

- If Stock: # shares of:
Broker:

- Other

- If payment by credit card (Visa or MasterCard only)

Card #:

Card in name of:

Expiration Date:

Solicitation Code:

- Was gift solicited? Yes No

Is this an existing pledge payment? Yes No

Send receipt to:

Designation Name (and Code, if known):

(If no designation is noted with the gift, attach how designation was determined if NOT unrestricted (e-mail from donor, documented verbal conversation, etc.)

Unrestricted gift to be transferred as follows:

If prior gift, identify by the original gift date/amount/designation:

Authorized by:

(President)

Account Name:

Amount:

Account Name:

Amount: