



Advancement Operations at Western University  
 Located in Westminster Hall Room 260.  
 Phone: 519-661-4176 - Fax: 519-661-4182

Questions? Please contact Gift Services at donationrevenue@uwo.ca or 519-661-2111 x85321.

**1. Donor Information**

Donor Name: \_\_\_\_\_ BBCRM ID: \_\_\_\_\_

Recognition Name: \_\_\_\_\_

Anonymous?  Yes  No      Soft Credit?  Yes  No      Soft Credit ID: \_\_\_\_\_

*For Corporate Donations:*

Org Contact: \_\_\_\_\_ Contact Address: \_\_\_\_\_

**2. Payment / Pledge Details [DO NOT SEND Credit Card information via intercampus mail]**

<b>Payment Information:</b>	One-Time Donation	Pledge Payment	Sponsorship
Payment Amount: _____	Pledge #: _____	Credit Cards – Set as Recurring: <input type="checkbox"/> Yes <input type="checkbox"/> No	

OR

**Pledge Information:**

Pledge Total: \_\_\_\_\_ Installment Amount: \_\_\_\_\_ No. of Installments: \_\_\_\_\_

Start Date: \_\_\_\_\_ Frequency: \_\_\_\_\_ Reminder Type: \_\_\_\_\_

**Opportunity Information:** Status Updated to Accepted:  Yes  N/A Solicitor Credit(s): \_\_\_\_\_

Program: \_\_\_\_\_ Accepted Amount: \_\_\_\_\_ Response Date: \_\_\_\_\_

**3. Allocation Information**

Donor Agreement?  Yes  No      Project/Fund Name: \_\_\_\_\_

Fund Type: \_\_\_\_\_ Project/Speed Code: \_\_\_\_\_

**4. Submission Information**

Submitted by: \_\_\_\_\_ Ext. \_\_\_\_\_ Date Submitted: \_\_\_\_\_

*Comments:*

*For office (Advancement) use:*

**Pledge Specific:** Reminders: Yes/No      Expected Pay Method: \_\_\_\_\_      Pay Method Update: Yes/No

Gift Date: \_\_\_\_\_ Inbound Channel: \_\_\_\_\_ Pay Method: \_\_\_\_\_

Rev-category: \_\_\_\_\_ Designation: \_\_\_\_\_ Receipt Type: \_\_\_\_\_

*Comments:*