

## 1. Donor Information (please complete)

Donor: \_\_\_\_\_ Emplid: \_\_\_\_\_ Constituency Type: \_\_\_\_\_

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

If Corporate, contact name is required for receipting: \_\_\_\_\_

Program: \_\_\_\_\_ Anonymous:  Yes  No Soft Credit:  Yes  No Emplid: \_\_\_\_\_

No Emplid? Fill out this soft credit form.

PLEASE PROVIDE COPIES OF ALL DOCUMENTATION OR CORRESPONDENCE RELATED TO THE GIFT

## 2. Donation or Sponsorship Information (please complete)

Donation (charitable receipt issued)  Sponsorship (business receipt issued)

FOR FURTHER CLARIFICATION PLEASE VISIT GUIDELINES ON RECEIPTING

WHAT TYPE OF REMITTANCE?

One Time Gift Amount: \$ \_\_\_\_\_ (payment must be attached)

— OR —

Pledge Amount: \$ \_\_\_\_\_ Pledge payment: \_\_\_\_\_ Pledge #: \_\_\_\_\_

Pledge Start Date: \_\_\_\_\_ Payment Frequency: \_\_\_\_\_ Pledge Period: \_\_\_\_\_

DO NOT SEND CREDIT CARD PAYMENT INFORMATION VIA CAMPUS MAIL (PLEASE CONTACT X85321)

Fund Type: \_\_\_\_\_ Gift Agreement:  Yes  No

Account: \_\_\_\_\_ Fund: \_\_\_\_\_ Org Code: \_\_\_\_\_ Program or Project: \_\_\_\_\_

— OR — Speed Code: \_\_\_\_\_

Structural Theme: \_\_\_\_\_

Priority Project or Fund Name: \_\_\_\_\_

Named Gift Opportunity: \_\_\_\_\_

Gift Solicitor(s): \_\_\_\_\_

Submitted By: \_\_\_\_\_ Ext: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Comments:

## 3. For Office Use Only

Emplid: \_\_\_\_\_ Campaign: \_\_\_\_\_ Appeal: \_\_\_\_\_ Designation: \_\_\_\_\_ Program: \_\_\_\_\_

Charity:  UWO  UWO Fdn. Inc.  UK Fdn.  HK Fdn.

Charitable Number  
#10816 2587 RR0001

**Advancement Services**  
260 Westminster Hall  
Phone: 519-661-4176  
Fax: 519-661-4182

Questions? Please contact Janice Van Der Klugt at  
jburchil@uwo.ca or 519-661-2111 x85321