

Office of University Development

Revenue Transmittal - Gift with Benefits

(Not for use with event registrations run through a Davie Event)

Legal Consti	tuent Details:			
Full Name: PID:				
Address (if new o	donor or updated info): _			
Phone:		Email:		
Recognition	Credit Details:			
Full Name:			PID: _	
Full Name:			n.n.	
Address (if new o	lonor or updated info): _			
Phone:		Email:		
Relationship to L	egal Donor:			
Revenue Details:		Check	Cash	Credit Card
Total Revenue Amount \$ Gift is Anonymous				
	Design (6 digits)	Designation Description	Gift Amount	Appeal
Gift Portion:			\$	
		Benefit Name*		# ** Total Amount
Benefit Portion:		Denome Hume		\$
*Benefit must be requested and already set up in Davie before sending over revenue. Include Benefit Name here – not what is received through the benefit. For example, MPSC Morehead Champions - Silver.				
** Put the number put 2 in this field.	of benefits received here.	For example, if Benefit is MPSC Moreh	ead Champions - Silver o	and they are purchasing two,
	Gift Amount and	l Benefit Amount should equal the	: Total Revenue Amo	unt.
Prospect Pla	an Details: If gift is	associated with a Prospect Plan, m	ark the Opportunity a	accepted before submitting.
Plan Name:				
Plan Manager:	Manager: Original Ask Amount:			
Submitted by:		School/Un	it	
Phone:	e: Email:Date:			Date:
Comments/Note				
Credit Card	Information:			
Name as it app	ears on Card:			
Card type: ☐ VISA ☐ M/Card ☐ AmEx Last 4-CC digits:Exp Date:				
Card Number:				

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.