



# Development Office GIFT DEPOSIT FORM

Forward to: 332 South 1400 East, Suite 150 | 801.581.3720

Check one only. Prepare a separate gift deposit form for each.

- Cash    Check    Credit Card    Gift in Kind
- Honor    Memorial

Date: \_\_\_\_\_

Contact Name: \_\_\_\_\_

College/Department: \_\_\_\_\_

Campus Phone: \_\_\_\_\_ Campus Address: \_\_\_\_\_

Total # of gifts: \_\_\_\_\_ Total Amount: \$ \_\_\_\_\_

*For Development Office Use Only*

**Batch #:** \_\_\_\_\_

Account Title: \_\_\_\_\_

Gift Chartfield: \_\_\_\_\_

Prem. Chartfield: \_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Org Contact/Title: \_\_\_\_\_

Address (Line 1): \_\_\_\_\_

Address (Line 2): \_\_\_\_\_

Address (Line 3): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone#/Email: \_\_\_\_\_

Entity ID: \_\_\_\_\_ Check #: \_\_\_\_\_

Gift \$: \_\_\_\_\_ Prem. \$: \_\_\_\_\_

Allocation: \_\_\_\_\_ Appeal: \_\_\_\_\_

Proposal ID: \_\_\_\_\_ Credited Fundraiser ID: \_\_\_\_\_

Pledge Payment: Receipt #: \_\_\_\_\_  Matching Gift form attached

On Behalf of: \_\_\_\_\_ ID: \_\_\_\_\_

In Honor of: \_\_\_\_\_ ID: \_\_\_\_\_

In Memory of: \_\_\_\_\_ ID: \_\_\_\_\_

Family Notification: Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Comments/ Stewardship Instructions: \_\_\_\_\_

Account Title: \_\_\_\_\_

Gift Chartfield: \_\_\_\_\_

Prem. Chartfield: \_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Org Contact/Title: \_\_\_\_\_

Address (Line 1): \_\_\_\_\_

Address (Line 2): \_\_\_\_\_

Address (Line 3): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone#/Email: \_\_\_\_\_

Entity ID: \_\_\_\_\_ Check #: \_\_\_\_\_

Gift \$: \_\_\_\_\_ Prem. \$: \_\_\_\_\_

Allocation: \_\_\_\_\_ Appeal: \_\_\_\_\_

Proposal ID: \_\_\_\_\_ Credited Fundraiser ID: \_\_\_\_\_

Pledge Payment: Receipt #: \_\_\_\_\_  Matching Gift form attached

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In Honor of: \_\_\_\_\_ ID: \_\_\_\_\_

In Memory of: \_\_\_\_\_ ID: \_\_\_\_\_

Family Notification: Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Comments/ Stewardship Instructions: \_\_\_\_\_

Account Title: \_\_\_\_\_

Entity ID: \_\_\_\_\_ Check #: \_\_\_\_\_

Gift Chartfield: \_\_\_\_\_

Gift \$: \_\_\_\_\_ Prem. \$: \_\_\_\_\_

Prem. Chartfield: \_\_\_\_\_

Allocation: \_\_\_\_\_ Appeal: \_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Proposal ID: \_\_\_\_\_ Credited Fundraiser ID: \_\_\_\_\_

Org Contact/Title: \_\_\_\_\_

Pledge Payment: Receipt #: \_\_\_\_\_  Matching Gift form attached

Address (Line 1): \_\_\_\_\_

On Behalf of: \_\_\_\_\_ ID: \_\_\_\_\_

Address (Line 2): \_\_\_\_\_

In Honor of: \_\_\_\_\_ ID: \_\_\_\_\_

Address (Line 3): \_\_\_\_\_

In Memory of: \_\_\_\_\_ ID: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Family Notification: Name: \_\_\_\_\_

Phone#/Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Comments/ Stewardship Instructions: \_\_\_\_\_

Account Title: \_\_\_\_\_

Entity ID: \_\_\_\_\_ Check #: \_\_\_\_\_

Gift Chartfield: \_\_\_\_\_

Gift \$: \_\_\_\_\_ Prem. \$: \_\_\_\_\_

Prem. Chartfield: \_\_\_\_\_

Allocation: \_\_\_\_\_ Appeal: \_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Proposal ID: \_\_\_\_\_ Credited Fundraiser ID: \_\_\_\_\_

Org Contact/Title: \_\_\_\_\_

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In Honor of: \_\_\_\_\_ ID: \_\_\_\_\_

Address (Line 3): \_\_\_\_\_

In Memory of: \_\_\_\_\_ ID: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Family Notification: Name: \_\_\_\_\_

Phone#/Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Comments/ Stewardship Instructions: \_\_\_\_\_

Account Title: \_\_\_\_\_

Entity ID: \_\_\_\_\_ Check #: \_\_\_\_\_

Gift Chartfield: \_\_\_\_\_

Gift \$: \_\_\_\_\_ Prem. \$: \_\_\_\_\_

Prem. Chartfield: \_\_\_\_\_

Allocation: \_\_\_\_\_ Appeal: \_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Proposal ID: \_\_\_\_\_ Credited Fundraiser ID: \_\_\_\_\_

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In Memory of: \_\_\_\_\_ ID: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Family Notification: Name: \_\_\_\_\_

Phone#/Email: \_\_\_\_\_

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City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Comments/ Stewardship Instructions: \_\_\_\_\_