

Gift Transmittal Form

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| Use this Gift Transmittal form: |
|  To accompany gift donations received by University and Washburn Tech departments that are to be sent to the Foundation for deposit, receipting and acknowledgement. ***Do not deposit the check.*** |

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| **Department Contact Information** |
| Department: |  |
| Contact Person: |  |
| Campus Phone: |  |
| Building & Room # |  |
| Email Address: |  |
|  |  |
| Date Donation Received: |  |
| Date Donation sent to Foundation: |  |

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| **Donor Information** |
|  Donor Name\*: |  |
| Address: |  |
| Address: |  |
| Address: |  |
| City, State Zip |  |
| Country: |  |
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|  |  |
| \*The donor is the person who signed the check |

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| **Foundation Fund Description** | **Foundation** **Fund/Project Number** | **Amount** |
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|  |  |  |
|  |  |  |
| **Total** | **$** |

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| **Detailed Description of Donation:** |
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| **Special Instructions:** |
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| **Send or bring the check, any documentation received including envelopes and the completed gift transmittal form to the Foundation** |