

CWRU ADVANCEMENT SERVICES DONATION CHECKLIST

(Submit to Gifts Processing along with **Non-Annual Fund** charitable donations)

DONOR INFORMATION:

Legal Donor Name & Entity ID _____

Associated Donor(s) Names & Entity ID's _____

DONATION INFORMATION:

Gift Type (Gift, Pledge, Pledge Payment, etc.) _____

Donation Amount _____

Allocation School (s) _____

Account Number(s) _____

If the donation is a Pledge, detail the pledge payment schedule:

Is this contribution in Honor or Memory of Someone? Y or N

If Yes, Name & Entity ID of the Honoree _____

If Yes, Name & Entity of the person to notify for acknowledgement _____

Is this contribution associated with an Appeal? Y or N Appeal Code _____

Is this contribution Anonymous? Y or N

Comments: _____

SOLICITING DEVELOPMENT OFFICER INFORMATION:

Name of Soliciting Fundraiser _____ Active Proposal ID _____

Phone Number _____ Email Address _____