



WKU FOUNDATION

Your Gifts. WKU's Future.

Submitted by: _____

Extension: _____

ADVICE OF CASH GIFT

INSTRUCTIONS: Prepare and print this form for all cash gifts received. Deliver with all money and *ALL COPIES OF ANY CORRESPONDENCE RELATING TO GIFTS*, to the WKU Foundation Office **within 24-hours** of receipt of gift. If you have any questions please call us at 5-3105.

<i>Department Transmitting Gifts</i>		<i>Date Transmitted</i>	
Donor's Name (Contact name required if company or business)		Amount	
Donor's Address (Street, City, State, Zip Code)		Charitable _____ Non-Charitable _____	
Name of Fund		Foundation Account Number	
Credit Card: American Express MasterCard Discover Visa	Credit Card Number:	Expiration Date:	
Donor's Name (Contact name required if company or business)		Amount	
Donor's Address (Street, City, State, Zip Code)		Charitable _____ Non-Charitable _____	
Name of Fund		Foundation Account Number	
Credit Card: American Express MasterCard Discover Visa	Credit Card Number:	Expiration Date:	
Donor's Name (Contact name required if company or business)		Amount	
Donor's Address (Street, City, State, Zip Code)		Charitable _____ Non-Charitable _____	
Name of Fund		Foundation Account Number	
Credit Card: American Express MasterCard Discover Visa	Credit Card Number:	Expiration Date:	
Donor's Name (Contact name required if company or business)		Amount	
Donor's Address (Street, City, State, Zip Code)		Charitable _____ Non-Charitable _____	
Name of Fund		Foundation Account Number	
Credit Card: American Express MasterCard Discover Visa	Credit Card Number:	Expiration Date:	