

UNIVERSITY NAME

Office of Estate & Gift Planning
123 University Avenue
City, State, Zip Code

GIFT INVOICE

Invoice #: _____

Date: _____

DONOR / ESTATE INFORMATION

Name: _____

Representative: _____

Address: _____

GIFT DESIGNATION

Fund Name: _____

Department: _____

Type: Bequest / Trust / Other

Description of Contribution / Asset	Valuation/Amount
[Description of Bequest, Securities, or Property]	\$0.00
[Administrative/Legal Fees, if applicable]	\$0.00

Subtotal: \$0.00
Adjustments: \$0.00
Total Legacy Gift: \$0.00

Notes: Please make all checks payable to [Full University Legal Name]. For wire transfers or stock transfers, please contact the Treasury Office at (555) 000-0000.

The University is a 501(c)(3) non-profit organization. Your contribution is tax-deductible to the extent allowed by law.