

Solicited Gift Form

Submitted By		Date	
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New Solicited Gift	<input type="checkbox"/>	Existing Pledge Payment	<input type="checkbox"/>	Appeal Solicitation	<input type="checkbox"/>
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Appeal	
Fund ID / Name	

Solicitor Name								
Solicitor Type	RM	<input type="checkbox"/>	Doctor	<input type="checkbox"/>	Volunteer	<input type="checkbox"/>	Other	

Donor ID		Donor Name	
Address	Preferred address on RE record		
	Other address		

Gift Amount	\$		Gift Frequency		
Pledge over	<input type="checkbox"/>	years, with payments of	<input type="checkbox"/>	beginning	<input type="checkbox"/>
and continuing					

Credit Card Type		Cardholder Name	
Credit Card Number		Expiry Date	

Anonymous?		Tax Receipt?	
Soft Credit?		Soft Credit Name	

Special Instructions, including recognition:

Email