## Gift Transmittal Form

Gift Total*	\$		
Donor ID*			☐ Charge to credit card listed below
Donor Name*			
In Honor of			Card Number
In Memory of			Exp. Date
Appeal Code			Card Zip Code
Designated to:*	Amount	Allocation Code	Allocation Name
	\$		
	\$		
	\$		
	\$		
	\$		

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