UNIVERSITY OF MISSOURI ADVICE OF GIFT RECEIVED

☐ COLË¿¹ÏappBlA ☐ KANSAS CITY	- ROLLA	- ST. LOUIS	- SYSTEM
SI	HORT FORM		

(For Cash gifts under \$1,000)

INSTRUCTIONS: Prepare this form in duplicate for all cash gifts received under \$1,000. Send original copy, with money and <u>ALL COPIES OF ANY CORRESPONDENCE RELATING TO GIFT</u>, to Campus Development Office within 24 hours of receipt of gift. List Donors in alphabetical order.

List Donors in alphabetical order.		
Department Transmitting Gifts	Date Transmitted	
Donor's Name	Date Gift Received	Amount
Donor's Address (Street, City, State, Zip Code)		
Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched,	etc.)	University Affiliation
		Alumnus Friend
Name of Fund		Account Code
	lp : 0'' p : 1	
Donor's Name	Date Gift Received	Amount
Donor's Address (Street, City, State, Zip Code)		
Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched,	etc.)	University Affiliation Alumnus Friend
Name of Fund		Account Code
realite of Fund	,	Account Code
Donor's Name	Date Gift Received	Amount
Donor's Address (Street, City, State, Zip Code)		
Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched,	etc.)	University Affiliation Alumnus Friend
Name of Fund		
TVAITE OF FUILU		Account Code
Donor's Name	Date Gift Received	Amount Code
Donor's Name	Date Gift Received	
Donor's Name Donor's Address (Street, City, State, Zip Code)	Date Gift Received	Amount
Donor's Name Donor's Address (Street, City, State, Zip Code)	Date Gift Received	Amount University Affiliation
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund	Date Gift Received	Amount University Affiliation Alumnus Friend Account Code
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name	Date Gift Received	Amount University Affiliation Alumnus Friend
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund	Date Gift Received	Amount University Affiliation Alumnus Friend Account Code
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name	etc.) Date Gift Received	Amount University Affiliation Alumnus Friend Account Code Amount University Affiliation
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Address (Street, City, State, Zip Code)	etc.) Date Gift Received	Amount University Affiliation Alumnus Friend Account Code Amount
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund	etc.) Date Gift Received etc.)	Amount University Affiliation Alumnus Friend Account Code Amount University Affiliation Alumnus Friend Account Code
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched,	etc.) Date Gift Received	Amount University Affiliation Alumnus Friend Account Code Amount University Affiliation Alumnus Friend
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund	etc.) Date Gift Received etc.)	Amount University Affiliation Alumnus Friend Account Code Amount University Affiliation Alumnus Friend Account Code
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name	etc.) Date Gift Received etc.) Date Gift Received	Amount University Affiliation Alumnus Friend Account Code Amount University Affiliation Alumnus Friend Account Code
Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Address (Street, City, State, Zip Code) Restrictions On Use Of Gift (Purpose, Division or Department Designated For, Memorials, To Be Matched, Name of Fund Donor's Name Donor's Name Donor's Address (Street, City, State, Zip Code)	etc.) Date Gift Received etc.) Date Gift Received etc.)	Amount University Affiliation Account Code Amount University Affiliation Alumnus Friend Account Code Amount University Affiliation Account Code University Affiliation