Return **completed forms** to PSU Foundation
Mail Code: FOUND
2125 SW 4th Ste 510 Unitus Bldg

PSU Foundation
PORTLAND STATE UNIVERSITY

Gift Transmittal Form

Department	Contact	Phone	Email	Date

Donor Information ID#

Additional updates to donor's record can be emailed to: psuupdates@pdx.edu

Name		Address information is required for all cash and credit card donations.	
Address		Employer	Job Title
City, State Zip	Phone	Email	Business Phone

Corporate/Foundation Donor Information

Company Name	Contact Person	Title
Address	Phone	Fax
City, State Zip	Email	

Soft Credit Information

Name *(Must be a single individual, not an organization.)*	Title/Affiliation Company/Foundation

Gift Information ____ Anonymous?

Appeal coding if applicable:

Account Name

Account Number	Gift Amount	Non-charitable Amt

Account Name

Account Number	Gift Amount	Non-charitable Amt

Payment Information

Cash *(Include address of donor)* $_____ Verified by:_____ Verified by:_____

Check *(Include documentation if made payable to PSU)* $_____ Check #:_____

Credit Card Information Select one: ◯Visa ◯MC ◯Amex ◯Discover

Name on card

Card Number as it appears on card, with spaces Expiration

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐/☐☐

Gift Notes

Notes/special comments for Donation Receipt

Additional Acknowledgement Instructions

In Honor of

Please notify the Honoree that a gift has been made in their Honor.

Name Phone

Address

City, State Zip

In Memory of

Please notify next of kin that a Memorial gift has been made.

Name Phone

Address

City, State Zip

Clear Form