

CREATE
Change

CREATE Wise
Women

GIFT INTENTION FORM



DUCHESNE
COLLEGE



GIFT INTENTION FORM

CONFIDENTIAL:

Head of College and Chief Executive
Duchesne College
College Road, St Lucia, QLD 4067
Phone: 61 7 3377 2333 Email: engagement@duchesne.uq.edu.au

On the understanding that the following gift intention may be altered in future years by me/us should circumstances necessitate, I/we are pleased to make the following tax-deductible gift to Duchesne College

Name: _____

Address: _____

Email: _____ Mobile: _____

1. My/our annual pledge to the campaign is \$ _____ starting 20 _____ until 20 _____

2. Payment Details:

1 annual gift of \$ _____ Starting Date: _____

4 equal quarterly gifts of \$ _____ Starting Date: _____

10 equal monthly gifts of \$ _____ Starting Date: _____

3a. Recurrent periodic payments from credit card:

Credit Card: Visa MasterCard

Card number:

Expiry: _____ / _____ CSV: _____

Name on Card: _____

Signature: _____ Date: _____

OR

3b. Recurrent periodic payments from bank account:

BSB: _____ Account no: _____

Account name: _____

Name of financial institution: _____ Branch: _____

OR

3c. Direct debit: NAME: Duchesne College CREATE WISE WOMEN FUND BSB: 064-786 ACCOUNT: 100027244

4. Tax receipt in name of: _____

5. Donor recognition: I am/we are happy to have my/our names (not amount) published in the annual list of donors:

Yes I/we prefer to remain anonymous

6. Other information:

I have a tax obligation in the USA. Please provide me with further details

Please provide information about making a gift through my Will to Duchesne College

OFFICE USE ONLY:

Donor No:

Parent Code:

Pledge No:

Frequency:

Amount:

DATA

B POINT