## CAF AMERICA DONOR ADVISED GIFT FORM

## SINGLE GIFTS WITHOUT ESTABLISHING A DONOR ADVISED FUND

## **DONOR INFORMATION:**

In compliance with anti-money contact information, and date of	~ ~	est practices, CAF America requests a donor's full name, address,	,
FULL NAME:			
ADDRESS (No PO Boxes):			
PHONE:	EMAIL:	DATE OF BIRTH:	
GIFT INFORMATION:			
PLEASE CHECK ONE			
☐ I enclose a check pay	yable to CAF America in tl	he amount of \$	
$\square$ I enclose details of a	wire transfer made to CA	F America in the amount of \$	
	stock transfer made to Ca	•	
If you intend to make a	donation via credit card, p	please go to cafamerica.org/donor-advised-gift-form/	
SINGLE GIFT PRICING			
· ·	on fee of \$80. For gifts recommen	t \$200,000; 1% of any additional amount (over \$300,000)  nded to charitable organizations not currently eligible with CAF Amer  ity validation.	rica,
, , ,	atabase of eligible charities o	on the CAF America website or reach out to us directly to determin	ne the
I SUGGEST MY GIFT B	E USED TO SUPPOR	RT:	
☐ The following Charita  Address and contact	•		
(including phone and			
Charitable registration	on number		
(if available):			
and discretion with regard to its	assets. All grants made by CA efundable. I confirm that I wil	rty of CAF America and that CAF America has ultimate control, a AF America are in its sole and independent discretion. I understar Il receive no tangible benefit or privilege from either CAF Americ	nd that
SIGNATURE:		DATE:	
	nd best practice recommenda	merica is required to confirm donor identity in accordance with a ations. CAF America does not distribute, sell, or otherwise release	

If you need help making a donation, have questions, or would like to donate complex, non-cash assets, please reach out to info@cafamerica.org.

Please make copies of this form as needed. Send the form together with your donation.

**CAF AMERICA** 225 Reinekers Lane, Suite 375 Alexandria, VA 22314 USA

