CAF America Donor Advised Fund Gift Form



DONOR INFORMATION

In compliance with anti-money address, and date of birth.	laundering regulations & best practi	ices, CAF America requests donor's full name,
PHONE:	FAX:	DATE OF BIRTH:
GIFT INFORMATION		
PLEASE CHECK ONE		
☐ I enclose a check paya	able to CAF America in the amount o	of\$
	wire transfer made to CAF America i	
☐ I enclose details of a s	stock transfer made to CAF America	. Symbol # of shares
		tercard 🔲 Visa 🔲 American Express
* Please note billing addr	ess must match home or business ad	dress provided above.
NAME AS IT APPEARS OF	N CARD:	
ACCOUNT NUMBER:	EXP DA	TE: SECURITY CODE:
SIGNATURE:		
DDICING		
PRICING		
Domestic	International	Minimum Initial Contribution: \$5,000
3% of the first \$500,000 1.5% of the next \$500,000	5% of the first \$500,000 3% of the next \$1,000,000	
0.6% of the next \$2,000,000	1% of the next \$3,000,000	International Validation Fee (Enhanced Expenditure Responsibility):
0.3% of any additional amount	0.5% of any amount above \$4,500,000	\$400 per international organization
I SUGGEST MY GIFT BE US	SED TO SUPPORT:	
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discretion with regard to its assets. All	grants made by CAF America are in its sole a	d that CAF America has ultimate control, authority, and nd independent discretion. I understand that my gift to CAF ge from either CAF America or any suggested charity in return
-		D.4.T.F.
All donations must be accompanied by confirm donor identity in accordance w	a signed Gift Form. All donations without a	DATE: signed Gift Form will be returned. CAF America is required to pest practice recommendations. CAF America does not equired by law.
Please make copies of this fo	orm as needed. Send the form, tog	ether with your donation.
CAF America		,,

www.cafamerica.org

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