

Donor Name Request

In order to provide you with a list of donors to your Fund, please fill out the information below. Once we receive your completed request we will usually process it within five business days. This list will be emailed to you as an Excel document.

NOTE: The first list generated is free but thereafter there will be a \$20 charge for each list we process. This amount will be deducted from the Fund listed below.

1. Donations to the _____ Fund

2. Gift dates:

From ____ / ____ / ____

To ____ / ____ / ____

3. Check the information you would like included in the list:

- | | |
|---|--|
| <input type="checkbox"/> Amount given | <input type="checkbox"/> Salutation (i.e., Mr. and Mrs. Doe) |
| <input type="checkbox"/> Date of gift | <input type="checkbox"/> Address 1 (i.e., 111 Any Road) |
| <input type="checkbox"/> Prefix (i.e., Mr.) | <input type="checkbox"/> Address 2 (i.e., PO Box 111) |
| <input type="checkbox"/> First name (i.e., John) | <input type="checkbox"/> City (i.e., Anytown) |
| <input type="checkbox"/> Last name (i.e., Doe) | <input type="checkbox"/> State (i.e., ZZ) |
| <input type="checkbox"/> Spouse Prefix (i.e., Mrs.) | <input type="checkbox"/> Zip (i.e., 00000) |
| <input type="checkbox"/> Spouse First name (i.e., Jane) | <input type="checkbox"/> Phone number (if available) |
| <input type="checkbox"/> Spouse Last name (i.e., Doe) | <input type="checkbox"/> Email (if available) |
| <input type="checkbox"/> Address name (i.e., Mr. and Mrs. John Doe) | |

4. Send list by email to:

Name: _____

Email: _____

5. Authorization:

Name: _____

Signature: _____

Date: _____

NOTE: In order to process this request we must have an authorized signature. An authorized signature is from someone who is set up as either the Advisor to the Fund specified in line 1, or is authorized to sign off on grants or disbursements from the Fund.

Berkshire Taconic Community Foundation

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