

GIFT REPORTING FORM

ATTN: Office of Stewardship and Development
 1408 Carmel Drive
 Lafayette, Louisiana 70501
 Email: csleblanc@diolaf.org / Fax No.: (337) 261-5645

Date: _____

Parish #: _____

*Please submit completed form *monthly* to the Office of Stewardship and Development.

PARISH: _____

ADDRESS: _____

CITY: _____

PHONE: _____ PREPARED BY: _____



PLEASE LIST ALL BSA GIFTS REMITTED DIRECTLY TO PARISH AND RECEIVED BY CASH, CHECK, OR ONLINE:

FULL NAME OF DONOR (Last, First)	ADDRESS	CITY	ST	CHECK #	GIFT AMOUNT
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
LOOSE CASH (Not identifiable):				\$	
TOTAL AMOUNT OF PARISH CHECK (Please attach):				\$	

REVISED January 2018 - FSJ

