



888-226-8929 888-617-3800 (Fax) info@automhatic.com

## **GIFT LETTER**

To Whom It May Concern:			
I/We			
Donor(s) Name			
Address, City, State, Zip Code			<del></del>
The Donor(s) certify that I/We (check one):	will give	OR	have given as the
	OF		
Relationship to Recipient(s)	Recipient(s) of Gift		
A gift in the amount of \$ This is a bonefide gift and there is no obligatio time. These funds are available and (check or		or implied,	to repay this sum at any
will be given no lat	er than the clo	sing date	
	OR		
have been given to the Recipient(s) to be u	used for the pu	rchase of	the property located at:
(Address, City State	e Zip of purchased	d home)	
Signature of Donor	Signature of Donor		
Dhana Number of Danas		Dete	
Phone Number of Donor		Date	