

Gift By Mail Form

Gift Information

Enclosed is my/our gift of \$ _____

Designation (list dollar amount for each area)

\$ _____ Purdue Annual Fund (University Unrestricted) (RF0001)
\$ _____ College/School (specify) _____
\$ _____ Department (specify) _____
\$ _____ Libraries (RF0088)
\$ _____ Other (specify) _____
\$ _____ Other (specify) _____

Payment Authorization

Check (payable to Purdue Foundation)

Credit card or debit card

As specified above, I authorize Purdue Foundation to charge my:

Card number _____	Exp. date _____
Name on card _____	Signature _____
_____	Date _____

Matching Gifts

I anticipate that my gift will be matched by (specify company) _____

Donor Information

Name _____
Street address _____
City _____
State _____ Zip code _____
Telephone _____
e-mail _____
Alumna/us? yes no Year graduated: _____
School _____

Spouse Information

Spouse name _____
e-mail _____
Alumna/us? yes no Year graduated: _____
School _____
Name at graduation _____

Mail form to: Purdue Foundation, 403 West Wood Street, West Lafayette, IN 47907-2007

Contact us at: (800) 319-2199 or gifts@purdue.edu