Use this form to set up automatically recurring gifts to Purdue using your credit card, debit card, or checking account. You determine how much, how often, how long, and where you want the money to go. Please print an extra copy of this form for your records.

## Gift Information

**Designation (list dollar amount of each payment)**

- $ ____________  Purdue Annual Fund (University Unrestricted) (RF0001)
- $ ____________  College/School (specify)  __________________________________________________
- $ ____________  Department (specify)  ____________________________________________________
- $ ____________  Libraries (RF0088)
- $ ____________  Other (specify)  __________________________________________________________
- $ ____________  Other (specify)  __________________________________________________________

**Start date:**

**How often?**

- [ ] Monthly
- [ ] Quarterly
- [ ] Semi-annually
- [ ] Annually

**How long?**

- [ ] Until I notify you to stop
- [ ] Number of payments: _____
- [ ] Stop date: ________________

## Payment Authorization

- [ ] Checking account (Please enclose a cancelled check)
- [ ] Credit card or debit card

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

- [ ] Visa
- [ ] Mastercard
- [ ] Discover
- [ ] American Express

Card number _____________________________________________________________________________  Exp. date ________________  3 Dig Sec Code ________________

Name on card _____________________________________________________________________________

- [ ] My credit card billing address is the same as the address listed above.

If different, please provide billing address ____________________________________________________

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 ________________________________

Mail form to:  Purdue Foundation, 403 West Wood Street, West Lafayette, IN 47907-2007
Contact us at:  (800) 319-2199 or  gifts@purdue.ed u

## Spouse Information

Spouse name __________________________
  e-mail _____________________________

Alumna/us?  yes  no  Year graduated: ________  School ________________________________

Name at graduation ____________________________

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

_______  My credit card billing address is the same as the address listed above.