



Donation Form

Donor Name _____ Account Number (if known) _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

This gift is for the benefit of (Fund designation or area of greatest need/unrestricted)

Amount & Frequency of gift

Installment amount \$ _____ x Desired # of installments _____ =

Total gift amount \$ _____

Frequency of installment(s): One time Monthly Quarterly Annually
Is this gift anonymous? Yes No

Payment Method:

Please send me reminders to pay by check or stock

Credit Card & EFT Authorization

Credit/Debit Card Authorization

Credit Type (please check one) VISA MasterCard Discover American Express

Credit Card Number _____ Expiration Date _____

EFT - Electronic Funds Transfer Authorization (For EFT you must include a voided check)

Bank Name _____ Account Number _____

Signature Required

Signature _____ Date _____