



# GIFT FORM

Full Name (please print) \_\_\_\_\_

Home Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Ext. \_\_\_\_\_

Preferred Phone (check one:  Cell  Home  Work) \_\_\_\_\_

Preferred Email Address \_\_\_\_\_

Company Name (optional) \_\_\_\_\_

Title \_\_\_\_\_

## GIFT DESIGNATION

Enclosed is my gift in the amount of: \$ \_\_\_\_\_

I/my spouse work for a matching gift company. My completed matching gift form is enclosed.

Please designate my gift for:  UMSL Fund  Other \_\_\_\_\_

## METHOD OF PAYMENT

My check is enclosed (payable to: the University of Missouri-St. Louis)

Please charge my credit card:  MasterCard  Visa  Discover

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Signature: \_\_\_\_\_

I would like to donate securities. Please contact me at: \_\_\_\_\_

## MEMORIAL AND TRIBUTE GIFTS

My gift is in memory of: \_\_\_\_\_

My gift is in honor of: \_\_\_\_\_ On the occasion of: \_\_\_\_\_

Please notify the following individual of my gift: \_\_\_\_\_  
Name

Address \_\_\_\_\_ City, State Zip \_\_\_\_\_

Your gift to the University of Missouri-St. Louis is tax deductible as allowed by law.



**PLEASE MAIL THIS FORM WITH YOUR GIFT ENCLOSED TO:**

University of Missouri-St. Louis, Advancement Services  
308 Woods Hall, 1 University Blvd., St. Louis, MO 63121