

GIFT FORM

Name: _____

Address: _____

City, St, Zip: _____

Spouse: _____

Phone: _____

Email: _____

GIFT INFORMATION

_____ A check for my gift of \$_____ is enclosed.
Checks should be made payable to the *Illinois State University Foundation*.

_____ Please charge my gift of \$_____ to the following credit card:

Circle One: VISA MASTERCARD DISCOVER

Name on card: _____

Account #: _____ Exp. Date: _____

Signature: _____

GIFT DESIGNATION:

Please restrict my gift for:

If your gift can be matched by your employer or your spouse's employer's matching gift program, please check with your personnel or benefits office for details and the proper form to enclose.

Please mail this form along with your contribution directly to :

Illinois State University Foundation
Campus Box 8000
Normal, IL 61790-8000