PLEDGE FORM

DONATION

I would like to make a donation to:

* < Fund 1 >­
* < Fund 2 >
* < Fund 3 >

In the amount of:

* < $ >
* < $$ >
* < $$$ >
* Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To be made:

* Once
* Monthly
* Quarterly

PAYMENT

I would like to make my gift with:

* Cash
* Check < please make payable to…. >
* Online via < short url to My UW Giving here >

DONOR INFORMATION

Name (First, Last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse / Partner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

QUESTIONS?

Please contact Advancement Services

206.543.2235 or casadser@uw.edu



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