Mail-in Gift Form
giveto.pitt.edu/giveULS

PERSONAL INFORMATION

Title (ie. Dr./Mr./Mrs./Ms.): _____  First Name: ___________________________  Middle Initial: ____
Last Name: ___________________________  Suffix (ie. Jr./Sr./PhD): _____

Address: ____________________________________________________________  Street Address
Home  Business  Seasonal
City  State  Zip Code

Home Phone: ___________________________  Other Phone: ___________________________  □ Business  □ Mobile
E-mail Address: ___________________________  Year of Graduation: __________

PLEASE DIRECT MY GIFT TO:

□ General Library Fund
□ Hillman Library Reinvention
□ August Wilson Archive
□ ULS Archives Gift Fund
□ The Archival Scholar Research Award
□ Other ___________________________

GIFT INFORMATION

Join the CHANCELLOR’S CIRCLE! Make an annual gift of $1,000 or more.

GIFT AMOUNT  $_____________________

Send forms and payment to:
University of Pittsburgh, PO Box 640093, Pittsburgh, PA 15264-0093

PREFERRED PAYMENT OPTIONS

□ Check: Please make payable to University of Pittsburgh.
□ Credit Card:  □ Visa  □ MasterCard  □ Discover  □ American Express

Account No. ___________________________
Expiration Date _______________________  CVV __________
Signature ____________________________

2300ULSGF
MATCHING GIFTS: This contribution will be matched by:

My employer: ________________________________

Joint Donor’s employer: ________________________________

☐ Corporate matching gift form(s) enclosed

For instructions on how to make a corporate matching gift please contact your company’s human resources department or matching gift officer.

HONORARY AND MEMORIAL GIFTS:

☐ Check here if this is a Memorial Gift

Name of deceased individual: ________________________________

☐ Check here if this is an Honorary Gift

Name of individual being honored: ________________________________

Reason or occasion: ________________________________

☐ Please notify the individual listed below that I have made this gift:

Name ________________________________

Address ________________________________ Street Address ________________________________

City ________________________________ State ___________ ZIP Code ___________

PLANNED GIFTS:

☐ Check here to indicate that your will or trust provides for the University of Pittsburgh

☐ Please check here if you would like more information on life income plans

THANK YOU FOR YOUR GENEROUS SUPPORT!

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