



Pacific Lutheran University
 Office of Development and University Relations
 Tacoma, Washington 98447-0018
 Phone: 253-535-7177 Toll Free: 1-800-826-0035 Fax: 253-535-8377

Date: _____

Donor Information:

Name: _____ Class Year: _____
 Spouse Name: _____ Class Year: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____
 Cell Phone: _____ Email Address: _____

Gift Information:

Total Gift Amount: \$ _____

Gift Designation:

Q Club: Academic Excellence Campus Life Student Scholarships Greatest Need
 Endowment: _____
 Capital Projects: _____
 Other: _____

Fulfillment Options:

I would like to fulfill this pledge: Monthly Quarterly Semi-annually Annually Starting: _____
 Please send me pledge reminders.

Optional Gift Instructions:

This gift is: In Honor of: In Memory of: _____
 Anonymous

Matching Gift Information: You can double or triple your gift through matching gift programs!

My employer participates in gift matching.
 You can find out if your employer matches at: www.matchinggifts.com/plu/
 My employer is: _____
 My spouse's employer is: _____

Gift Opportunities:

I would like to speak with a representative from the Office of Development regarding:
 Bequests Gifts of Appreciated Assets Charitable Trusts or Annuities
 Named Endowed Funds Named Gift Opportunities Gifts of Tangible Personal Property
 Is Pacific Lutheran University in your will or other testamentary plans? Yes No Would Consider

Fulfillment Information:

Please charge my credit card
 Name as it appears on the card: _____
 Type: MasterCard Visa American Express Discover
 Card Number: _____ Expiration Date: _____
 Signature: _____
 My check is enclosed, payable to: Pacific Lutheran University

Please print and mail this form to:
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