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Last Name		First Name	First Name		
Spouse Last Name		Spouse First Name			
Address					
City/State/Zip					
Email Address	Phone Number				
GIFT DESIGNATION	N				
Please designate my/or	ur gift to:				
AMOUNT	FUND NUMBER	FUND NAME	APPLY GIFT TO AN EXISTING PLEDGE		
PAYMENT INFORM		ed (payable to <i>University of Wisconsin Fo</i>	undation).		
$\bigcirc$ I authorize the Unive	ersity of Wisconsin Found	ation to charge my credit card for a one-t	ime gift in the amount		
of \$					
CREDIT CARD INF	ORMATION				
Name on Card					
$\bigcirc$ Visa $\bigcirc$ MasterCar	rd O American Express	O Discover			
Card Number	Number Exp. Date (mm/yy)				
Signature					
Mail this form and chec	k, if applicable, to:	Ques	tions: Contact Gift Processing		

Please do not send completed PDFs with credit card information via email.

**UW** Foundation

Box 78807

U.S. Bank Lockbox

Milwaukee, WI 53278-0807

**Questions:** Contact Gift Processing Phone: 608-263-4545 or 800-443-6162 Email: giving@supportuw.org

To set up a recurring gift or make a tribute gift, visit: supportuw.org/give

For matching-gift questions, visit: supportuw.org/match