



# MANHATTAN UNIVERSITY

## FUND FOR MANHATTAN GIFT FORM

### Gift/Pledge Options

- I would like to make a gift to Manhattan University in the amount of \$\_\_\_\_\_.
- I prefer to make a special pledge of \$\_\_\_\_\_, payable over \_\_\_\_\_ years, beginning \_\_\_\_\_(Month/Year).

### Funding Options

- I am enclosing a check made payable to Manhattan University
- I authorize Manhattan University to collect my gift of \$\_\_\_\_\_ through my (circle one):



Name as it appears on card \_\_\_\_\_

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

### MATCHING GIFT REMINDER

- I am enclosing a matching gift form from: \_\_\_\_\_ (company).
- I submitted a matching gift application with my employer: \_\_\_\_\_ (company).

### DESIGNATION(S)

- I am making this gift \_\_\_\_\_ in honor of, or \_\_\_\_\_ in memory of: \_\_\_\_\_.
- I would like to meet with a staff member to discuss alternate ways of giving (stocks, bonds, wills/bequests, etc).
- Please check here if you do not wish your name to appear in any donor listing.

**Please use the space below to provide us with other important information.**

Name: \_\_\_\_\_

Employer: \_\_\_\_\_

Graduation Year (if applicable): \_\_\_\_\_

Job Title: \_\_\_\_\_

Home Address 1: \_\_\_\_\_

Business Address 1: \_\_\_\_\_

Home Address 2: \_\_\_\_\_

Business Address 2: \_\_\_\_\_

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

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

Home Telephone: \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Home E-mail: \_\_\_\_\_

Business E-mail: \_\_\_\_\_

- I prefer not to receive email solicitations from Manhattan

This line for office use only: \_\_\_\_\_

**Please complete this form and return to the address below.**

*Checks may be made payable to Manhattan University*

Manhattan University Development Office | 4513 Manhattan College Parkway | Riverdale, NY 10471  
Phone: (718) 862-7701 | Fax: (718) 862-8021 | E-mail: giving@manhattan.edu