



Contribution Form
Making a Gift to the University of Minnesota Rochester

I am making the following contribution to the University of Minnesota Rochester:

\$ _____ TOTAL AMOUNT OF GIFT _____
Signature

DONOR INFORMATION

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Name [As should appear in acknowledgements] _____
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E-mail _____ Birth Date [optional] _____
Do you work for a company that matches gifts to the University? Yes No Don't Know
Employer _____ Job Title _____

GIFT DESIGNATION [Please check the manner in which you would like your gift used.]

\$ _____ **Chancellors Fund for Excellence**
These funds are designated by the Chancellor's staff for such purposes as venture capital, lectureships, endowed professors/chairs, special student projects/needs.
 \$ _____ **Scholarships:** General Specific [please name] _____
 \$ _____ **Other** [please name] _____

PAYMENT METHOD

Check Enclosed [payable to University of Minnesota Foundation]
 Credit Card: VISA MasterCard Discover American Express
Card No. _____ Expiration Date _____
Please print name as it appears on card _____
Signature _____

For information about recurring gifts/pledges, estate planning, or other giving options, please contact:

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Thank you!