THANK YOU FOR MAKING A DIFFERENCE AT WEST VIRGINIA UNIVERSITY

Please complete this form and send it with your gift to:
WVU Foundation – P.O. Box 1650 – Morgantown, WV 26507-1650

Name: _____
(Please type or print)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

If WVU Graduate, Year of Graduation: _____ If WVU Employee, WVU ID: _____
(optional)

Enclosed is my gift to support:

☐ _____
(College, campus, or program)

☐ WVU General Scholarship Fund

☐ WVU's Greatest Need

☐ This is an installment on my outstanding pledge.

Payment details: (Check any that apply)

☐ $ _____ check (payable to WVU Foundation)

☐ $ _____ one time credit card charge

☐ $ _____ monthly recurring credit card charge

Begin date: _____ End date: _____
(Charges occur on the 10th of each month)

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(Name as it appears on card)

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(Signature for credit card authorization)

Card Type: ☐ American Express ☐ Visa ☐ Discover ☐ MasterCard

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☐ **I would like information about including WVU in my estate plan.**

Additional comments:

WVU FOUNDATION

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Seventh Floor
P.O. Box 1650
Morgantown, WV 26507-1650
877-791-4344 (toll free)
304-284-4095 (direct)