

Donor Information

Your name/maiden name	Chec
Spouse/partner name	
Class year	in
Preferred mailing address: O Home O Business	\bigcirc
Street	My fir
City State ZIP	
Phone number	
Email address(es)	Ом

Yes, I would like to support the university with a tax-deductible gift/pledge at the following level:

\$20,000
\$2,500
\$10,000
\$1,000
\$5,000

Leadership giving levels with special benefits and invitations

O other (please specify)

For pledges of \$25,000 and above, a fundraiser will contact you to formally document your generous commitment. Please ensure that you provide a phone number and email address in the Donor Information area.

Please designate my gift/pledge to:

OUC Berkeley Arts & Humanities

O other (please specify)_____

Fill out and mail this form to:

University of California, Berkeley Gift Services 1995 University Avenue, Suite 400 Berkeley, CA 94704-1070

The information you provide will be used for university business and will not be released unless required by law. A portion of each gift is allocated to Berkeley's fundraising and engagement efforts. This extends the impact of private support and helps renew the university's public mission and ensure its world-class excellence. All gifts are tax-deductible as prescribed by law.

Payment Options

Checks may be made payable to $\ensuremath{\textit{UC}}\xspace$ $\ensuremath{\textit{Berkeley}}\xspace$ $\ensuremath{\textit{Foundation}}\xspace$

Full amount enclosed or charge full amount to credit card indicated below

O I would like to make payments (up to five years): O annually O quarterly O monthly

My first payment of \$___

- 🔘 is enclosed
 - igodown should be charged to the credit card indicated below
 - \bigcirc other (please specify)_

igodown My payments will be made through the following foundation/trust

Date

I will use best efforts to, and fully intend to, satisfy my pledged commitment.

Signature____

Credit Card Information

I authorize UC Berkeley to charge my credit card:

O MasterCard	🔿 Visa	O American Express	O Discover
Card number			
Expiration date			
Name on card			

Signature _

In addition to my personal gift, a *matching gift form from my employer:* O is enclosed O will be mailed

Want further information on...

Including Cal in your will, trust, or retirement plan? Visit **planyourlegacy.berkeley.edu**.

Making a gift of securities? Call **510.642.6791**.

Making a gift online? Visit **give.berkeley.edu**.

Anything else donor-related? Contact **510.643.9789** or **gifthelp@berkeley.edu**.

