13091

PURDUE UNIVERSITY

GIFT FORM
(check or credit card)

I/WE WOULD LIKE TO MAKE A GIFT TODAY TO THE COLLEGE OF VETERINARY MEDICINE AT PURDUE UNIVERSITY.

Total gift amount: $ _____

I would like my gift to be used for (program/fund)

$_____ Area of Greatest Need (RF0077)
$_____ DVM and Vet Tech Scholarships (019810)
$_____ Financial Assistance for Pet Owners (005510)
$_____ In Memoriam Program (001122)
$_____ Regional Equine Diagnostic and Surgical Center (016197)
$_____ Veterinary Teaching Hospital Gift Fund (002586)
$_____ Other _____

PLEASE PRINT CLEARLY:

Name: _____
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City: _____ State: _____ Zip: _____
Telephone: _____
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Alumna/us: [ ] YES or [ ] NO
College / Year: _____

Spouse Name: _____
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PAYMENT INFORMATION:

[ ] **By Check** – made payable to **Purdue Foundation**

[ ] **By Credit Card**

I authorize Purdue University to charge $ _____ to my:

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Card number: _____ Exp. Date: _____ Sec Code: _____

Print name as it appears on card: _____

[ ] My credit card billing address is the same as the address listed above.

If different, please provide billing address: _____

Signature: _____ **Date:** _____

MAIL THIS FORM AND PAYMENT TO:

College of Veterinary Medicine
Development Office
Lynn Hall, rm 1177-A
625 Harrison Street
West Lafayette, IN 47907-2026
(765) 494-6304 (765) 496-1261 (fax)
gifts@prf.org

[ ] This gift will be matched.
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Matching gift forms should be obtained from the company, completed and mailed to:

Purdue Foundation
Dauch Alumni Center
403 West Wood Street
West Lafayette, IN 47907