

Please print this form and mail or fax it to the address listed below.

Name: _____

School(s): _____ Year(s): _____

Street: _____

City: _____ State: _____ Zip: _____

Day Phone: (_____) _____

PLEASE DESIGNATE MY GIFT/PLEDGE AS FOLLOWS

Annual Fund:

- \$ _____ The College Fund, the College of Arts & Sciences Annual Fund
- \$ _____ Case School of Engineering
- \$ _____ School of Dental Medicine
- \$ _____ School of Law
- \$ _____ Weatherhead School of Management
- \$ _____ School of Medicine
- \$ _____ Frances Payne Bolton School of Nursing
- \$ _____ Mandel School of Applied Social Sciences
- \$ _____ Spartan Athletics Fund
- \$ _____ Kelvin Smith Library Fund
- \$ _____ Parents and Family Fund
- \$ _____ President's Strategic Initiative Fund
- \$ _____ Undergraduate Shared Scholarship Fund

Other Program or Designation:

Please designate my gift of \$ _____
to: _____

Memorial Gift:

This gift is in ____memory or ____honor of:

Please notify the following individual/family of my gift:

Name _____

Street Address: _____

City: _____ State: _____ Zip: _____

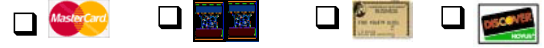
I prefer this gift/pledge remain anonymous

SPECIAL INSTRUCTIONS:

Thank you for your support!

METHOD OF PAYMENT

- Check:** (Made payable to Case Western Reserve University)
- Credit Card:**



Name as it appears on credit card: _____

Account Number: _____

Expiration Date: _____ CVV: _____

Signature: _____

E-Z Giving (electronic fund transfers):

I authorize my ____bank or ____credit card to make continuous monthly payments of \$ _____ (\$10 minimum/month) by the method indicated below on the ____1st or ____15th of each month until I notify Case Western Reserve University otherwise.

- Checking Account:**
Enclosed is my check for the first month.
- Credit Card Option** (Please fill credit card information above.)

A Pledge. I wish to make a pledge of \$ _____

I wish to pay my pledge in equal installments. Please schedule my payments as follows:

- \$ _____ Date: _____
- \$ _____ Date: _____
- \$ _____ Date: _____
- \$ _____ Date: _____
- \$ _____ Date: _____

Stock Gift. I wish to fulfill my gift with stocks. To initiate a gift in the form of a stock transfer, please call the Office of Investments: 1.800.315.3863.

DOUBLE YOUR GIFT

If you or your spouse work for a matching gift company, please obtain and initiate the necessary form(s).

I would like to include my school in my Will; please send information.

Send or Fax this Form To:

Case Western Reserve University
10900 Euclid Avenue
Cleveland, Ohio 44106-7035

1.800.690.ALUM • Fax: 216.368.4619