

## **University of South Carolina Pledge Form**

Dr./Ms. Mrs./Mr.					Preferred Grad Year	
Name:	First	Middle	Last			
Home A	Address		City		State	Zip
Home P	hone	Cell Phone	Email   Work	Home		
I wish t	o make a gift/pled	ge of \$				
☐ Му с	heck made payable	to UNIVERSITY FOUNDATIONS*	is enclosed.			
□Bill n	ne for my gift in inc	crements of \$ beginnin	g 🔲 N	Monthly □ Quarte	erly Semi-A	Annually   One-Tin
Charg	ge my credit/debit o	eard in increments of \$	in the selected mon		, _	, —
	☐ Jul ☐ Aug	☐ Sep ☐ Oct ☐ Nov ☐ Dec		* *	May 🗌 Jun	
	Card Number	erCard 🗌 Discover 🔲 American E		Expiration Date		
	Name as it appear	rs on card				
□I pref	er to make my gift	via Electronic Funds Transfer. (An E	FT authorization form wil	ll be mailed to yo	ou.)	
☐ I wis	h for my gift to rem	ain anonymous.				
☐ Joint	gift with my spous	e:				
		Spouse name (include grad year, i	f applicable)			
Matc	hing Gift Company	Name:		☐ Form A	Attached F	iled Electronically
	he designation(s) f s equal your total	or your gift and the portion of your gift.)	gift that each should re	ceive. (Please ma	ake sure the	individual gift
Designation (Please specify location if other than Columbia campus.			npus.) Amo	Amount		
Designation (Please specify location if other than Columbia campus			npus.) Amo	Amount		
Signature (Required for all transactions)						

\* All gifts to USC Foundations are used to support the University of South Carolina. Checks may also be made to the USC Treasurer's Office; these gifts are managed by the State of South Carolina.

> Please return completed form with signature to: Gift Processing-1027 Barnwell Street, Suite 214-Columbia, SC 29208 Fax to 803-777-4488 or E-mail to scgift@sc.edu.