

University of Dubuque

Give every year. Make a difference every day.

In recognition of my/our commitment to University of Dubuque students, I/we hereby pledge \$_____ to ***The Annual Fund.***

Please apply my/our contribution to advance the mission of the university:

____ Area of Greatest Need
____ College
____ Seminary

____ Scholarships
____ College
____ Seminary

____ Library Acquisitions & Programs

____ Technology Enhancements

____ Faculty & Staff Development

____ Campus Beautification

____ Student Life

Payment Methods:

Check:

Payment enclosed: \$_____ (please make checks payable to the University of Dubuque)

Credit/Debit Card:

____ Visa ____ Mastercard ____ Discover

Name of Cardholder: _____

Signature: _____

Account Number: _____

Expiration Date: ____/____/____ V-code _____

(last 3 digits on signature bar)

Website:

Visit UD at www.dbq.edu/makeagift to make your contribution via our secure online gift site.

Pledge:

Please bill me:

____ quarterly

____ semi-annually

____ annually on _____ before **May 31, 2013**
(date)

Matching Gift:

____ My/my spouse's employer will match this gift.

Employer Name: _____

Your matching gift provides an excellent opportunity for you to double, or in some cases, even triple the impact of your gift. Please contact your employer's human resources office for the appropriate forms and enclose them with your pledge.

I/we understand this is a pledge, and I/we agree to honor the pledge as indicated by May 31, 2013. If my/our circumstances change and other arrangements need to be made regarding my/our pledge commitment, I/we will contact the Advancement/Alumni Relations Office at (563)589-3158.

Signature(s)

Date

Street Address

City

State/Zip

(____) _____
Area/Phone

(____) _____
Cell Phone

Email address

Class Year

Your support of UD students is greatly appreciated. THANK YOU!

University of Dubuque

Advancement/Alumni Relations

2000 University Ave

Dubuque, IA 52001

1-800-483-2586

Visit us online at www.dbq.edu

I/We have included the University of Dubuque:

____ In my/our will/trust

____ In other estate plans

I/We would like information on:

____ Membership in the Heritage Society

____ Establishing a Named Scholarship

____ Including UD in my/our will