THE UNIVERSITY OF MISSISSIPPI | Foundation

GIFT AGREEMENT

Donor Name _____

Spouse Name _____

Address _____

City_____ State_____ Zip _____

Preferred Phone_____ Email _____

For recognition purposes:

☐ Please list my/our names as _____

☐ Anonymous

COMMITMENT

Please accept my/our commitment

☐ $_____ restricted to provide support for the_____

_____ purpose/fund.

☐ $_____ unrestricted to be used for the University of Mississippi's highest priorities.

FULFILLMENT

I/we would like to make an outright gift or first pledge payment of $ _____ .

☐ Check payable to The University of Mississippi Foundation

☐ Credit Card #_____ Exp_____ CVV _____

I/we would like to fulfill this commitment over _____ ☐ months ☐ years,

beginning on _____ through payments of $_____ to be made

in equal installments ☐ monthly ☐ quarterly ☐ annually

I/we intend to make these payments by

☐ check ☐ credit card (provided above) ☐ ACH bank draft (please provide a voided check)

☐ stock and securities (please contact the Foundation for transfer instructions)

Supplemental information: _____

_____

_____

Donor Signature_____ Date_____

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