



PERSONAL INFORMATION			
Title (ie. Dr./Mr./Mrs./Ms.): First Name			
Last Name:	Suffix (ie. Jr./Sr. /PhD):		
Address:	Apartment/Unit		
City	State Zip Code		
Home Phone: O	ther Phone: Business Mobile		
E-mail Address: Year of Graduation:			
OLET INFORMATION			
GIFT INFORMATION			
Join the CHANCELLOR'S CIRCLE! Make an annual gift of \$1,000 or more.			
PLEASE DIRECT MY GIFT TO:	PREFERRED PAYMENT OPTIONS		
☐ The Pitt Fund	☐ Check: Please make payable to University of Pittsburgh.		
General Scholarship Fund	☐ Credit Card: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express Account No		
Panthers Forward	Expiration Date CVV		
Other	Signature		
GIFT AMOUNT \$			

Send forms and payment to: University of Pittsburgh, PO Box 640093, Pittsburgh, PA 15264-0093



ADDITIONAL GIFT INFORMATION

My employer:		
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☐ Corporate matching gift form(s) enclosed For instructions on how to make a corporate matching gift please contact department or matching gift officer.	t your company's hu	ıman resources
HONORARY AND MEMORIAL GIFTS:		
☐ Check here if this is a Memorial Gift		
Name of deceased individual:		
☐ Check here if this is an Honorary Gift		
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Reason or occasion:		
\Box Please notify the individual listed below that I have made this Q	gift:	
Name		
AddressStreet Address		Apartment/Unit#
City		ZIP Code
PLANNED GIFTS:		
\Box Check here to indicate that your will or trust provides for the U	niversity of Pittsb	urgh

THANK YOU FOR YOUR GENEROUS SUPPORT!

 \square Please check here if you would like more information on life income plans

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