



ONE-TIME GIFT

Enclosed is my gift of \$_____ designated to:

The University of Michigan-Flint Annual Fund

Other: _____

First Name: _____ Middle: _____ Last Name: _____

Name to appear on receipt: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: (____)_____-_____-_____ Evening Phone: (____)_____-_____-_____

E-mail Address _____

Enclosed is a check made payable to the University of Michigan.

Charge my gift to: VISA MasterCard AmEx Discover

Account Number: _____ Expiration Date: _____

Name as it appears on card: _____

Signature: _____

Enclosed is my employer's completed Matching Gift form.

Employer: _____ Phone Number: (____)_____-_____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Your gift is greatly appreciated!

Please mail this form to:
The University of Michigan-Flint
Institutional Advancement, 1001 Northbank Center
303 E. Kearsley Street
Flint, MI 48502

For questions about your gift please call (810)767-2150.

For Office Use Only:
EID _____ Account _____ Campaign _____ Reunion _____