



<p><b>MY INFORMATION</b></p> <p>Name _____ School/Unit/Program _____</p> <p>Campus address _____</p> <p>Emp. ID # _____ (Located on your pay stub)</p> <p>Pay Type: <input type="checkbox"/> Biweekly <input type="checkbox"/> 10 months <input type="checkbox"/> 12 months</p> <p><input type="checkbox"/> This gift is made jointly with: _____ Name of spouse/partner</p>	<p>Home address:</p> <p>Street _____</p> <p>City _____</p> <p>State _____ Zip _____</p> <p>Preferred address: <input type="checkbox"/> Home <input type="checkbox"/> Business</p>
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**GIFT SELECTION**

For a list of account numbers, additional gift forms, and updated campaign information, go to [campuscampaign.iupui.edu](http://campuscampaign.iupui.edu).

I want to make a gift to:

\_\_\_\_\_ \$ \_\_\_\_\_  
Account name

\_\_\_\_\_ \$ \_\_\_\_\_  
Account #

\_\_\_\_\_ \$ \_\_\_\_\_  
Account name

\_\_\_\_\_ \$ \_\_\_\_\_  
Account #

Please list additional accounts on a separate sheet and attach.

**Gifts without a designated account name and number will be credited to the IUPUI Fund for the Future (I320003076).**

**Chancellor's Circle (I320003078)** \$ \_\_\_\_\_

Chancellor's Circle gifts will be used for general support of IUPUI— often in areas of greatest need—at the discretion of the chancellor. Faculty and staff may join with a minimum gift of \$500.

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**Gift Total** \$ \_\_\_\_\_

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FOR ADMINISTRATIVE USE ONLY **IU19BADIINOT11NATF1A0**

**PAYMENT OPTIONS**

**1. Payroll Deduction Pledge**  
**NOTE: Minimum is \$5 per pay, minimum of four pay periods**

\$ \_\_\_\_\_ per pay for \_\_\_\_\_ pay periods

Total gift amount: \$ \_\_\_\_\_

Signature (required): \_\_\_\_\_

This deduction (check if applicable)

should be added to my current payroll deductions

is a new deduction/gift

replaces all current payroll deductions

**2. Multiyear Pledge(s)**

Please send pledge reminders for installments of \$ \_\_\_\_\_ contributed:  Annually  Semiannually  Quarterly  Monthly

Beginning \_\_\_\_ / \_\_\_\_ and ending \_\_\_\_ / \_\_\_\_  
MM YY MM YY

**3. Check**

Enclosed is my check made payable to the **IU Foundation** in the amount of: \$ \_\_\_\_\_

**4. Charge**

I wish to charge my gift in the amount of: \$ \_\_\_\_\_

American Express  Discover  MasterCard  Visa

Account # \_\_\_\_\_

Expires \_\_\_\_ / \_\_\_\_  
MM YY

Signature (required): \_\_\_\_\_

Please return this form to your Campus Campaign coordinator.  
Don't know the name of your Campus Campaign coordinator? Visit [campuscampaign.iupui.edu](http://campuscampaign.iupui.edu).

**Thank you!**