## **GIFT AGREEMENT**

Thank you for your gift to the University of North Dakota. It will help lead and strengthen UND. This form is to help you provide information about your gift to ensure that it will be used in accordance with your wishes.

## **GIFT INFORMATION**

I/we pledge to UND thi	ough the UND Alu	mni Assoc	iation & Foundat	ion a gift of: \$_		
GIFT DESIGNATION	: If your gift is split be	tween designa	ations, please indicat	e below. For single	designations, use one line	
\$	_ to the:				<del>-</del>	
\$	_ to the:					
GIFT PAYMENT To be paid in equal pay (Preferably not	ments over to exceed 5 years)	years.	☐ Annually	☐ Quarterly	☐ Monthly	
For pledge reminder pu	,	nt to be mad	le on:/_			
Please make checks p				oe sent for your con	venience. Donor Advised	
PRIMARY DONOR	CONTACT INFO	RMATION	I			
Name(s)		Second Name (if joint gift)				
Preferred Address		City		State Zip		
Home Phone	Cell Phone		Work Phone	Ema	Email Address	
RECOGNITION PRE	FERENCE					
☐ I/We prefer this gift recognition lists and nar		<b>JS.</b> With ar	nonymous gifts, yo	our name will be	excluded from all	
Public: With public recomagazine, brochures, d				lists as applicab	le (e.g. website,	
Please publish my/our	name(s) as follow	's:				
SIGNATURE						
Signature		Date	Signature		Date	
UND Alumni Association and	l Foundation - Federal	TAX ID: #45-0	0348296			

All gifts to UND through the University of North Dakota Alumni Association and Foundation are tax deductible to the extent provided by law. Please consult your tax advisor. If the gift purpose is left blank, your gift will support the UND Annual Impact Fund.

The University of North Dakota Alumni Association and Foundation is a recognized North Dakota nonprofit corporation, is exempted from federal income tax liability by Internal Revenue Code Section 501(c)(3), and qualifies as a public charity under Internal Revenue Code Section 509.





## Error! Unknown document property name. MATCHING GIFTS

If you work for, are retired from, or serve on the board of a company with a matching gift program, please obtain their matching gift form and return it to us to extend the impact of your gift.

While matching gifts received from your employer will count toward your Eternal Flame Society recognition level, it does not fulfill your personal commitment as indicated on this form.

PLEASE AUTOMATE MY PAYME	ENT
☐ ACH from Checking/Savings Accou ☐ Debit/Credit Card (You will be contained and All automatic payments are process	unt (Please attach a voided check/savings deposit slip.) acted to set up payment.) sed on the 15 <sup>th</sup> day of the month.
,	,
	- For internal use only
	Check any additional boxes that apply:



☐ New Endowment ☐ Building/Naming Opportunities ☐ Trust/Gift Annuity

☐ New Donor Advised Fund