

OHIO UNIVERSITY

The Ohio University Foundation

PLEASE DESIGNATE MY GIFT TO:

Name of Fund (or Area of Ohio University You Want to Support)

_____ \$ _____
Your Gift Amount

MY INFORMATION

Name

Home Address

City, State, and Zip Code

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Check Appropriate Box: HOME CELL WORK

Alumni: include your degree and class year here

I'D LIKE TO MAKE MY GIFT BY CREDIT CARD

Check Appropriate Box: MASTERCARD VISA AMERICAN EXPRESS DISCOVER

Credit Card Number

Exp. Date (MM/YY)

Name As It Appears On Card

Cardholder's Signature

Please return this form to:

The Ohio University Foundation, P.O. Box 869, Athens OH 45701