



# Berkeley

## Donor Information

Your name/maiden name \_\_\_\_\_

Spouse/partner name \_\_\_\_\_

Class year \_\_\_\_\_

Preferred mailing address:

Home address  Business address

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone number \_\_\_\_\_

Email address(es) \_\_\_\_\_

## Further Information

- Estate planning and life income opportunities
- Please contact me with more information about volunteer opportunities
- Please send me the *Berkeley Online* electronic newsletter (You must include your email address above to receive the newsletter.)
- If you prefer to make a gift of securities, please call 510.642.6791

### Fill out and mail this form to:

University of California, Berkeley  
Donor and Gift Services  
1995 University Avenue, Suite 400  
Berkeley, CA 94704-1070

If you have any questions or would like additional information, please contact our office at:  
**510.643.9789 or gifthelp@berkeley.edu**

The information you provide will be used for university business and will not be released unless required by law. A portion of all gifts is used to defray the costs of administering the funds. All gifts are tax-deductible as prescribed by law.

Visit [give.berkeley.edu](http://give.berkeley.edu) to make your gift online today.



## Yes, I would like to support the university with a tax-deductible gift/pledge at the following level:

- \$20,000
- \$10,000
- \$5,000
- \$2,500
- \$1,000
- other (please specify) \_\_\_\_\_

} Leadership giving levels with special benefits and invitations

For pledges of \$25,000 and above, a fundraiser will contact you to formally document your generous commitment. Please ensure that you provide a phone number and email address in the Donor Information area.

Please designate my gift/pledge to:

- The Cal Fund
- my school/college \_\_\_\_\_
- other (please specify) \_\_\_\_\_

## Payment Options

Checks may be made payable to UC Berkeley Foundation

- Full amount enclosed or charge full amount to credit card indicated below
- I would like to make payments (up to five years):
  - annually
  - quarterly
  - monthly
- My first payment of \$ \_\_\_\_\_
  - is enclosed
  - should be charged to the credit card indicated below
  - other (please specify) \_\_\_\_\_
- My payments will be made through the following foundation/trust \_\_\_\_\_

I will use best efforts to, and fully intend to, satisfy my pledged commitment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Credit Card Information

I authorize UC Berkeley to charge my credit card:

- MasterCard
- Visa
- American Express
- Discover

Card number \_\_\_\_\_

Expiration date \_\_\_\_\_

Name on card \_\_\_\_\_

Signature \_\_\_\_\_

In addition to my personal gift, a matching gift form from my employer:

- is enclosed
- will be mailed