



FOR OFFICE USE ONLY

Accepted via Phone Email In-Person

Accepted by: _____ Date: _____

Email: _____

Phone: _____

GIFT/PLEDGE FORM

I / we wish to make a gift/pledge of \$ _____ to the ECSU Foundation.

The gift should be designated to _____ (Fund # _____).

OPTION ONE: OUTRIGHT GIFT

Enclosed is the gift in full in the amount of \$ _____.

OPTION TWO: PLEDGE

The balance will be paid in _____ payments of \$ _____.

Payments will begin on ____ / ____ / ____ and will be paid over a period of 1 2 3 4 5 years.

Please send reminders: Yes No

DONOR INFORMATION

Name(s): _____

Home Phone: _____ Cell Phone: _____

Address: _____

City _____ State _____ Zip: _____

Email: _____

This gift will be matched by my company/spouse's company: _____

Note: If you expect a corporate match to your pledge payment(s), please do not include it in the total amount of your pledge. Be sure to contact the HR department for additional details.

I/we wish to remain anonymous. Do not list my/our name(s) on honor rolls.

PAYMENT METHOD

Check payable to the "ECSU Foundation"

Credit card (Please check one) American Express Discover MasterCard Visa

Card number _____ Exp. Date (MM/YYYY) _____ CSV Code _____

Name as it appears on card _____

Billing address (if different from above) _____

Signature (required) _____

Please mail this form to: ECSU University Advancement, 1704 Weeksville Road, Elizabeth City, NC 27909.

To make a gift online, please visit www.ecsu.edu/give or contact us at ecsufoundation@ecsu.edu or call 252-335-3225.

The ECSU Foundation is a registered 501(c)3. Tax Id: 23-7115345