



A Gift to the
Division of Student Affairs
Kappa Alpha Order Gift Fund

Donor Information

Mailing Preference: Home Business

Name(s) _____

Organization _____

Home Address

City _____ State _____ Zip Code _____

Telephone _____ E-Mail _____

Business Address

City _____ State _____ Zip Code _____

Telephone _____ E-Mail _____

Gift Supporting the Kappa Alpha Order Gift Fund

Kappa Alpha Order Gift Fund _____ Amount \$ _____

Payment Options

Check Enclosed is my gift check of \$ _____ made payable to **University of Maryland College Park Foundation**.

Credit Card I would like to charge \$ _____ to Master Card VISA Discover American Express.

Card Number _____ Expiration Date _____ CVV Code _____

Authorized Signature _____ Date _____

Multi-Year Pledge I am pledging \$ _____ and will make _____ annual payments as shown below:

1st payment of \$ _____ due by June 30, 20 _____ or my payment is enclosed.

2nd payment of \$ _____ due by June 30, 20 _____ or the following preferred date _____

3rd payment of \$ _____ due by June 30, 20 _____ or the following preferred date _____

4th payment of \$ _____ due by June 30, 20 _____ or the following preferred date _____

5th payment of \$ _____ due by June 30, 20 _____ or the following preferred date _____

Authorized Signature _____ Date _____

Other Information

This gift is made in

honor of memory of: _____

Please notify the following individual(s):

Name(s): _____

Address: _____

My employer will match my charitable contribution to this fund. Enclosed is the completed and signed matching gift form.

Please contact me regarding a gift of stock, real estate, personal property or wire transfer.

Please visit www.sgiving.umd.edu for more information or to make a gift online

Return Address

Please return this completed form and your gift to:

Division of Student Affairs Development Office
University of Maryland
James Rychner
8400 Baltimore Avenue, Suite 200
College Park, MD 20740