



The Daniel M. Zolotorofe Memorial Scholarship Fund

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Gift in Memory of Daniel

[] The Daniel M. Zolotorofe Foundation Memorial Scholarship Fund Amount \$ _____

Payment Options

Gifts may also be made online, please visit www.sagiving.umd.edu/ZolotorofeScholarship and click 'Make a Gift Online' at the top right

[] Check:

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

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

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Pledge Options

[] Multi-Year Pledge I am pleased to pledge \$ _____ in support of _____ (gift account name).

I will make payments in the amount of \$ _____ by _____ (day and month) of each year for _____ years.

Recurring payment options are available for pledge payments, see below for more information

[] Recurring Payment by Credit Card:

I would like to charge \$ _____ each month for _____ months to [] Master Card [] VISA [] Discover [] American Express.

Card Number _____ Expiration Date _____ CVV Code _____

Authorized Signature _____ Date _____

[] Recurring debit by Checking Account:

I would like to pay \$ _____ each month for _____ months. (A voided check is attached)

Other Information

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

Please return this completed form and your gift to:

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

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