



UNIVERSITY OF MARYLAND

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A Gift to the
UMD Prescription Assistance Fund
Division of Student Affairs

Gifts may also be made online. Please visit sagiving.umd.edu and click 'Make a Gift Online' at the top right.

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Gift Supporting the Division of Student Affairs

[] The UMD Prescription Assistance Fund Amount \$

Payment Options

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Pledge Options

[] Multi-Year Pledge I am pleased to pledge \$ in support of UMD Prescription Assistance Fund.
I will make payments in the amount of \$ by (day and month) of each year for years.
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This gift is made in [] honor of, [] memory of:
Please notify the following individual(s):
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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:

UMD Division of Student Affairs Development Office
8400 Baltimore Avenue, Suite 200
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