

Truman State University Contribution Form (Printable Form)

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I/we want to make a gift to:

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\$ _____ **TOTAL**

Payment Method:

☐ **Check enclosed** (make payable to Truman State University Foundation)

Credit Card Payment:

☐ My credit card information is listed below

☐ I will call with my credit card number (800) 452-6678

Type of Credit Card: ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa

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Personal Information

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Former name(s) if applicable,
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Home Phone: _____

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Employment (this helps us determine if you or your spouse work for a matching gift company. For more information on matching gift companies. For more information on matching gifts, visit www.truman.edu/giving/matching-gift-programs/

Employer: _____

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Is your spouse a Truman graduate? ☐ Yes ☐ No

Please include any comments or questions in the space provided below:

Please review your information carefully. If it's correct, print out the form and send by mail (if you are mailing the form, print out a second copy to keep for your records or save a file for your records.)

Office of Advancement
Truman State University
McClain Hall 205
100 E. Normal Ave.
Kirksville, MO 63501
Telephone: (800) 452-6678 or (660) 785-4133
Fax: (660) 785-7519
Giving.truman.edu

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