



**MONTANA  
STATE UNIVERSITY**  
**FOUNDATION**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please designate my gift to: (please circle your choice)

- College of Agriculture
- College of Arts & Architecture
- College of Business
- College of Education, Health & Human Development
- College of Engineering
- College of Letters and Science
- College of Nursing
- University College
- University Libraries
- Division of Graduate Education
- Or to Greatest Need

**I would like**

\_\_\_ this gift credited to me as an individual

\_\_\_ to share credit for this gift with my spouse: (name) \_\_\_\_\_

\_\_\_ to make this gift in memory of: (name) \_\_\_\_\_

\_\_\_ to make this gift in honor of: (name) \_\_\_\_\_

**Enclosed is my gift of:**

\$1000  \$500  \$250  \$100  \$50  \$25  Other: \_\_\_\_\_

***Make your check payable to MSU Foundation***

MasterCard  Visa  Discover  American Express

Expiration: (month/yr): \_\_\_\_/\_\_\_\_ card #: \_\_\_\_\_

My employer matches gifts to higher education

Employer Name: \_\_\_\_\_

I/We pledge: \$ (amount) \_\_\_\_\_ starting (month/year) \_\_\_\_\_

And ending (month/year) \_\_\_\_\_. Amount enclosed \$ \_\_\_\_\_

**For MSU Employees:**

\_\_\_ My gift of \$ \_\_\_\_\_ will be made through payroll withholding.

Social Security # \_\_\_\_\_

Amount deducted monthly: \_\_\_\_\_

Beginning Pay Date: \_\_\_\_\_

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Mail To: MSU Foundation · 1501 South 11th Avenue · P.O. Box 172750 · Bozeman, MT 59717-2750  
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