## YES... I would like to support the ASC Scholarship!



## **1. MY INFORMATION**

2

То

| NAME(s)                           |   | CAMPUS LAMPAIGN                                       |
|-----------------------------------|---|---|
| ADDRESS                           |   | 2010  |
| CITY, STATE, ZIP                  |   | Please return form to:                                |
| PHONE                             | EMAIL                                       | BGSU Foundation Office<br>132 Administration Building |
| BGSU ID (required for processing) |   | Bowling Green, OH 43403                               |
|                                   |   |   |
| . MY DONATION                     |   |   |
| I wish to make a gift to Admin    | nistrative Staff Scholarship (300004) in th | e amount of:  |

Gifts of \$1,000 or more during a fiscal year (July 1 - June 30) qualify for recognition in the BGSU Leadership Circle.

\$100

Other \$

\$250

## **3. MY CONTRIBUTION METHOD**

\$500

\$1,000

| Cash enclosed \$  |   |
|---|---|
| <b>Check</b> enclosed, made payable to the BGSU Foundation, Inc. \$                                   |   |
| Please charge my Credit Card (VISA, MC, American Express or Discover)       \$         Account Number |   |
| Continuous Payroll Deduction Payroll Deduction  |   |
| \$per pay period until\$one-time gift of  | deducted from next pay period, or           |
| further notice. \$ per pay period   | d to begin for one year.                    |
| Administrative Classified Faculty (12 mo.)  | Faculty (9 mo.)                             |
| Signature (required for all pledges) Date   | e   |
| o make your secure donation online, please visit: bgsu.edu/givecampuscampaign                         |   |
|   | Office Use Only Appeal Code: PRES18 ASC WEB |