



Gift/Pledge Information Form

University Advancement
bgsu.edu/alumni
(419) 372-2424 Phone
(888) 839-2586 Toll Free
(419) 372-7697 Fax

Please complete this form and return to:
BGSU Foundation, Inc.
c/o Office of the Bursar
Administration Building
Bowling Green, OH 43403

DONOR INFORMATION

Donor/Entity (Primary): _____ Constituent ID: _____
Joint Donor/Spouse (Secondary): _____ Constituent ID: _____
Mailing Address (Include City, State & Zip): _____
Phone(s): _____ Email address: _____
How should your name(s) appear for recognition purposes?: _____

For donor recognition purposes, BGSU is authorized to use your name(s), gift totals, and/or class years in print, online and/or other publications for honor rolls, gift clubs/levels, and programs. BGSU will not disclose personally identifiable information. Should you wish to remain confidential and/or opt out of public recognition, you may notify us in writing at the above address.

GIFT/PLEDGE INFORMATION

I/We would like to make a one-time gift of \$1,000 \$500 \$250 \$100 Other \$ _____
I/We would like to make an existing pledge payment of \$ _____ to Pledge # _____
I/We would like to make a new recurring Gift/Pledge in the amount of \$ _____
and will fulfill the commitment *Monthly* *Quarterly* *Semi-Annually*
Annually *Other schedule:* _____

A pledge term may not exceed five (5) years. Reminders will be sent pursuant to the selected payment schedule. If you do NOT want to receive reminders, please initial here. _____

PAYMENT METHOD INFORMATION

Check, payable to BGSU Foundation, Inc. Credit Card EFT Payroll deduction (BGSU employees only)
For your security and privacy, one-time and recurring credit card, EFT, and/or Payroll Deduction options require a separate payment authorization form. If using a credit card, we encourage you to make your secure donation online by visiting bgsu.edu/give.

Stock Planned Gift Third-Party Payment
I/We intend to fulfill this gift/pledge with Stock/Bonds/Securities I/We intend to fulfill or supplement this commitment with a Planned Gift I/We intend to fulfill or supplement this commitment through a third-party (i.e., Donor Advised Fund, Community or Family Foundation)
Stock Name/Ticker _____ Notes: _____ Name: _____
Anticipated No. of Shares: _____

Per IRS regulations, payments received from a donor advised fund, community/family foundation and/or corporations cannot satisfy a personal pledge obligation; however, the individual donors will still receive recognition credit. Personal pledges will be offset by the amounts received from the third-party.

GIFT ALLOCATION & DESIGNATION

Please allocate this gift/payment to: The Excellence Fund (#300023) Bridge to BG Scholarship Fund (#302500) Athletics/Falcon Club Fund** (#300399) (see declination section)

If Gift is to a specific Fund, list the Name and Fund Number: _____

Please briefly describe the purpose of the gift: _____

Apply gift as follows:

All to Immediate Use/Spendable All to Endowment Principal Split (applicable only to Endowments):
(If no selection is made, gifts to an endowed fund will be automatically applied toward principal)
Spendable \$ _____
Principal \$ _____

This gift is being made In honor of: _____
 In memory of: _____

(Please list honoree's full name & address. Notifications of your gift, including your name and address may be provided to an honoree and/or family members upon request.)

Additional GIFT NOTES (if applicable): _____

MATCHING GIFTS

As a benefit to employees, many employers offer matching gift programs. These programs can significantly increase and in some cases double the effective value of a contribution. Please contact your company's human resources or employee benefits office for more details, as policies, forms and processes vary by employer. Certain gifts may not be eligible for matching.

Yes, my employer, _____ has a Matching Gift Program.

Yes, my spouse's employer, _____ has a Matching Gift Program.

Attached is my employer's matching gift form.

I/We have applied for a matching gift and you should receive notice from Employer Third-party

****DECLINATION OF BENEFITS**

(for Falcon Club eligible gifts only)

I/We decline all benefits associated with this gift/level and would like our gift to be an entirely charitable contribution. *Certain donations to Athletic funds entitle the donor to Falcon Club membership benefits, which may impact the charitable deductibility of the gift. IRS rules state that donations with athletic ticket access or certain benefits may not be 100% charitable or deductible. Please consult your tax advisor with any questions. Should you wish to discuss the membership benefits or levels of support for Falcon Club, please contact 419-372-3589 or visit bgsu.edu/givefalconclub for details.*

SIGNATURE

I/We are committing to the above intentions in support of Bowling Green State University. The BGSU Foundation, Inc. is a 501(c)(3) and gifts are tax-deductible to the extent provided by law. Please consult your tax advisor for any specific questions regarding deduction eligibility.

Donor/Primary

Date

Donor/Secondary

Date

Thank You! Private support from donors like you ensures the quality of our educational programs. Your gift is an investment in our students, faculty, staff and the community we serve. We thank you for your loyalty and appreciate your continued support of Bowling Green State University!

Internal Use Only:

DOD/UA Staff: _____

Gift/Pledge #: _____

Fund #: _____

Proposal #: _____

Date: _____

Appeal Code: _____