A DEFINING moment
the campaign for COTTEY COLLEGE

Please print out and Fax or Mail this completed form to:
Institutional Advancement
Cottey College
1000 W. Austin, Nevada, MO 64772
Fax: (417) 448-1015 • Phone: (417) 448-1418

In support of the campaign for Cottey College and in consideration of the gifts of others, I/We commit to:
Total Pledge: $_____ Enclosed Payment: $_____ Balance: $_____
(Checks and other payments should be payable to Cottey College.)

The next/first payment will be made on _____, and thereafter
☐ Monthly ☐ Quarterly ☐ Semi annually ☐ Annually

Over a period of ○ 1 year ○ 2 years ○ 3 years ○ 4 years ○ 5 years

This will be a gift/pledge paid by
☐ Check/Money Order ☐ Stock ☐ Other: _____
☐ Credit Card: ○ VISA ○ MasterCard ○ Discover 3 Digit Credit Card Code: _____
Name on Card: _____ Account Number: _____ Expiration Date: _____

Corporate Matching Gifts: My gift will be matched by _____
☐ Signed and completed matching gift forms are enclosed.
☐ I have applied via company's Web site or phone system.

DONOR INFORMATION
Last Name: _____ First Name: _____
Corporation or Foundation *(if applicable)* _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ E-mail Address: _____
☐ Cottey Alumna Class Year: _____ ☐ P.E.O. Chapter: _____

DONOR RECOGNITION (Donors will be recognized in campaign materials unless an anonymous gift is requested).
Please use the following name(s) in all acknowledgements:
☐ I (We) wish to remain anonymous
DONOR SIGNATURE(S): _____ Date: _____
DESIGNATION:

Print

All contributions to Cottey College a non-profit, 501(c)(3) organization, are tax deductible to the fullest extent allowed by the law.