



## Mail-in Gift Form

### Part I – Giving opportunities within the Annual Fund

I would like my gift to support:

- Annual Fund
- Athletics – Scholarships
- College of Arts and Sciences
- College of Business Administration
- College of Education
- Extended Learning
- Library
- School of Nursing
- CSUSM Graduate (\$500)
- President's Circle Silver (\$1,000)
- President's Circle Gold (\$2,500)
- President's Circle Platinum (\$5,000)
- President's Circle Diamond (\$10,000)
- Other (specify in the box 'Other Designation' below)

Other Designation: \_\_\_\_\_

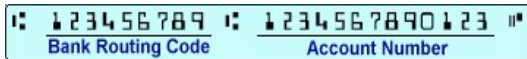
I would like to make a gift of: \$ \_\_\_\_\_

### University Advancement

333 S. Twin Oaks Valley Road San Marcos CA, 92096-0001  
(760) 750-4400 [giving@csusm.edu](mailto:giving@csusm.edu) [www.csusm.edu/giving](http://www.csusm.edu/giving)



## Mail-in Gift Form

Part II – Payment Information	
Type of Payment:	
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
<input type="checkbox"/> Electronic Check	<input type="checkbox"/> Personal Check
Credit Card Information	
Credit Card Number: _____	
Expiration Date (month / year): _____ / _____	CVV (3-digit number): _____
Name as it appears on card: _____	
Signature: _____	
Electronic Check Information (checking accounts only)	
	
Bank Routing Code: _____	
Account Number: _____	
Personal Check Information	
Make check payable to CSUSM Foundation	

### University Advancement



## Mail-in Gift Form

Part III – Your Information
Name: _____
Print Name (How would you like to be listed in the Honor Roll of Donors?): _____
<input type="checkbox"/> I wish to remain anonymous and not have my name listed in the Honor Roll of Donors.
Mailings: Would you like to receive Advancement mailings? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address: _____
Address (cont'd): _____
City: _____
State: _____
Billing Zip Code: _____
Preferred Email: _____
Preferred Phone: ( _____ ) _____ - _____ <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> Home

Please mail this form and your check (if applicable) to:

California State University San Marcos  
University Advancement  
333 S. Twin Oaks Valley Road  
San Marcos CA, 92096-0001

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