



Graceland
UNIVERSITY 11895

Gift Information Form

Print this form and return with your gift to:

Graceland University
Development Office
1 University Place
Lamoni, IA 50140

Name(s) _____

Address _____

City/State/ZIP code _____

Email _____

Cell Phone _____

My gift enclosed is:

- \$1,000 (Presidential Societies)
- \$500
- \$250
- \$100
- \$ Other _____

Please designate this gift for: _____

My employer matching gift form is enclosed.

Graceland is in my will or estate plan.

I authorize Graceland University to charge my gift of \$ _____ to



Visa



MasterCard



Discover



American Express

Credit/Debit Card # _____

Expiration Date _____ Security Code _____

Signature _____