

University Advancement 901 12th Avenue PO Box 222000 Seattle, WA 98122-1090

Total Pledge Amount: \$	year(s)
Designation(s):	
Payment Schedule – I/we will make:  ☐ Monthly payments of \$ ☐ Quarterly payments of \$ ☐ Annual payments of \$ ☐ A single payment of \$	every 3 months starting on (date). every year starting on (date).
☐ Enclosed is my/our first payment of ☐ Yes, please send pledge reminders to	
Method of Payment:  □Check – Make payable to Seattle Univ	versity and send to the address listed above.
□ <b>Online</b> – Make a secure online donati	on at http://www.seattleu.edu/giving
☐Stock/Securities – Find transfer instru	uctions at http://www.seattleu.edu/giving/how-to-give
□Donor Advised Fund - Please contact	Advancement Services to coordinate next steps with DAF.
□Credit Card – Make payment by Visa,	MasterCard, American Express, or Discover.
Name on Card	Exp. Date or this card or only the first payment
☐ Bank Draft/Direct Debit – direct debit	payments are processed on the 10th and 20th of the month (or following business day).  Account #
	Account Type:   Checking  Savings  Other  Initials
☐ Please consider my total expected n	h. Company Name:
Donor Name(s):	
Donor Recognition Listing:	<u>or</u> $\square$ Anonymous.
Special Instructions (optional):	
Address:	
Phone: Business	Email: Please send my receipt electronically, if possible.
Signature(s):	Date: