

# College of Business Leadership Giving Society Contribution Form



SAN FRANCISCO  
STATE UNIVERSITY

NAME/ADDRESS

## Yes, I understand that my support is vital to the College of Business

### LEADERSHIP CONTRIBUTION LEVELS

- |   |                      |
|---|----------------------|
| <input type="checkbox"/> Associate's Circle | \$1,000 to \$2,499   |
| <input type="checkbox"/> Professor's Circle | \$2,500 to \$4,999   |
| <input type="checkbox"/> Director's Circle  | \$5,000 to \$9,999   |
| <input type="checkbox"/> Chair's Circle     | \$10,000 to \$24,999 |
| <input type="checkbox"/> Dean's Circle      | \$25,000 and above   |

### STUDENT AND RECENT ALUMNI CONTRIBUTION LEVELS

- |   |                |
|---|----------------|
| <input type="checkbox"/> Officer's Club*    | \$250 to \$499 |
| <input type="checkbox"/> Principal's Club** | \$500 to \$999 |

Other \$ \_\_\_\_\_

\* Undergraduate degrees awarded within five years.

\*\* Undergraduate and graduate degrees awarded within five years.

### DIRECT YOUR CONTRIBUTION

- |  |          |
|--|----------|
| <input type="checkbox"/> Dean's Fund                               | \$ _____ |
| <input type="checkbox"/> Center for Ethical & Sustainable Business | \$ _____ |
| <input type="checkbox"/> Undergraduate Programs                    | \$ _____ |
| <input type="checkbox"/> Graduate Programs                         | \$ _____ |
| <input type="checkbox"/> Executive MBA Program                     | \$ _____ |
| <input type="checkbox"/> Department/Scholarship Fund:              |          |

\_\_\_\_\_ \$ \_\_\_\_\_

Total Contribution \$ \_\_\_\_\_

### RECOGNITION

- Please list my/our name/s as follows in recognition publications:

\_\_\_\_\_

Members of the Leadership Giving Society at the \$1,000 and above level will also be acknowledged as members of the San Francisco State University President's Circle. (San Francisco State University's fiscal year is July 1 to June 30.)

- While I understand that being recognized publicly for a donation may help encourage other donors, please publish my/our gift/s as "anonymous."

### SELECT YOUR PAYMENT METHOD

- A check is enclosed payable to:  
**University Corporation, San Francisco State**
- Please charge my gift to my:
- |   |                                     |
|---|-------------------------------------|
| <input type="checkbox"/> Visa             | <input type="checkbox"/> MasterCard |
| <input type="checkbox"/> American Express | <input type="checkbox"/> Discover   |

CARDHOLDER NAME \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

- PLEDGE—Please begin my pledge with the enclosed gift of \$ \_\_\_\_\_

I intend to contribute a total of \$ \_\_\_\_\_  
which I plan to complete by \_\_\_\_/\_\_\_\_/20\_\_\_\_

SIGNATURE \_\_\_\_\_

Please send me reminder notices:

- Monthly\*     Quarterly \*\*     Yearly  
\* Gifts of \$1,000 and above    \*\* Gifts of \$250 and above

- Please contact me about completing my gift through a donation of securities.

- My corporate matching gift:  
 is enclosed     will be mailed

- I'm making my gift online at:  
[www.cob.sfsu.edu/donateonline](http://www.cob.sfsu.edu/donateonline)

### ESTATE GIFTS / LIFETIME INCOME PLANS

- Yes, I have included the College of Business in my will.  
 Yes, I plan to include the College of Business in my will.  
 Please send me information about lifetime income plans and naming the College of Business in my estate plans.

### UPDATE CONTACT INFORMATION

- Please update my contact information as follows:

NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

PREFERRED E-MAIL \_\_\_\_\_

Please return this form with your gift.

**THANK YOU FOR YOUR SUPPORT**

San Francisco State University | Office of University Development | 1600 Holloway Avenue | San Francisco, CA 94132  
415.338.1032 | [donate@sfsu.edu](mailto:donate@sfsu.edu) | [www.cob.sfsu.edu/giving](http://www.cob.sfsu.edu/giving)