## Darrell Donakowski Memorial Scholarship

## Gift Form

I would like to make a gift to the Darrell Donakowski Memorial Scholarship\* at the University of Michigan-Dearborn:

First Name:		Middle Initial:	Last Na	Last Name:		
Home Ad	ldress:		Ног	me Phor	ne #	
Home City, State, ZIP:			Em	Email:		
Business Address				Business Phone#		
Business City, State, Zip:			Bus	Business Email:		
Tr.	otal Citt Amount C					
10	otal Gift Amount \$					
PAYMEN	T METHOD:					
	Credit Card: Visa 🗆	MasterCard	☐ Disco	ver 🗖	American Express 🗖	
	Credit card # Exp Date				Date	
	Signature (Required) _					
	Check: Enclosed is my check payable to: University of Michigan-Dearborn					
	Pledge payments:					
	I will make gift payme		☐ Quarterly	☐ Se	mi-Annually   Annually	
	Over a period of					
	Beginning: Month or as follows (list payme					
	Signature (Required) _					

## Please return this form and check, if applicable, to:

Institutional Advancement,
University of Michigan-Dearborn
4901 Evergreen Road, 1040AB
Dearborn, MI 48128
Or fax to 313-593-0540
If you have questions, please call 313-593-5130

if you have questions, please call 313-393-3130

<sup>\*</sup>This fund constitutes a gift for endowment and distributions from the Fund shall be made in accordance with the University's then existing endowment policy. Any surplus distributions from the Fund during any period may be accumulated for later use for the above purposes or may be added to the principal of the Fund, at the University's discretion.