

Print this form and return with your gift to:

Graceland University  
Development Office  
Post Office Box 64  
Lamoni, IA 50140-0064

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Email: \_\_\_\_\_

I authorize Graceland to charge  
my gift of \$ \_\_\_\_\_ to:

My gift enclosed is:

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



Visa



MasterCard



Discover



American Express

- My employer matching gift form is enclosed
- Graceland is in my will or estate plan
- Please designate my/our gift for \_\_\_\_\_

Credit card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Web