

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: _____
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