

WASHINGTON UNIVERSITY AND YOU: Philanthropic Partners



Support the Division of Palliative Medicine

There are many ways you can make a financial gift to support the Division of Palliative Medicine. For more information, please complete and return this form, or call Kristen Burger (314) 935-2877 or Rachel Hartmann (314) 935-9715 in the Office of Medical Advancement. Thank you for your ongoing support of the Medical School's vital mission.

GIVING OPPORTUNITIES

I wish to make a gift to the Division of Palliative Medicine as follows:

- ☐ **Division of Palliative Medicine (#90991)**
☐ **Other** _____

GIFT OR PLEDGE AMOUNT

- ☐ **I/We have enclosed a gift of:**
☐ \$2,500 ☐ \$1000 ☐ \$500
☐ \$250 ☐ \$100 ☐ Other _____
Please make checks payable to Washington University in St. Louis
- ☐ **I/We pledge a total of \$_____ (excluding any matching funds) to be paid as follows:**
Year 1 \$_____ Date____/____/____
Year 2 \$_____ Date____/____/____
Year 3 \$_____ Date____/____/____
Your gift to Washington University is tax deductible to the extent allowed by U.S. and Canadian law.

PAYMENT INFORMATION

- ☐ **Please charge my credit card:**
☐ AmEx ☐ Discover ☐ MasterCard ☐ Visa
- Name on Card _____
Card Number _____
Exp. Date _____
Signature _____

CONTACT INFORMATION

Name _____
Address _____
City _____
State _____ ZIP _____
Phone _____
E-mail _____

ATTRIBUTION

- ☐ I wish to make a ☐ **Memorial gift** or a gift in
☐ **Honor** of someone. Please designate my gift for:

Notification of your memorial or tribute gift will be sent to the person listed below. The gift amount will not be indicated.

Name _____
Address _____
City _____
State _____ ZIP _____

- ☐ I wish to make an **Anonymous** gift.

- ☐ **Please contact me with more information about special giving options:**
☐ Securities ☐ Real estate ☐ Life income plans
☐ Including Washington University in my estate plans
☐ Donor Advised Fund ☐ Family Foundation



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Make a gift online: gifts.wustl.edu/med

For additional information, please contact:

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