NAME:	UDJ CLASS OF:			
HOME ADDRESS:				
CITY:		STATE: _	ZIP:	
PREFERRED PHONE:	PREFERRED EM/	AIL:		
ENCLOSED IS A GIFT FOR: \$				
I WOULD LIKE TO DESIGNATE MY G	IFT TO: CubStror	ng Tuition	n Assistance	e Drive
MATCHING GIFTS MANY OR	GANIZATIONS WILL N	MATCH THE	VALUE OF CHA	RITABLE GIFTS
MADE BY EMPLOYEES. WANT TO INCRE	ASE YOUR IMPACT?	ASK YOUR	COMPANY'S BI	ENEFITS TEAM IF
THEY OFFER A MATCH.				
I PREFER TO PAY BY CHECK (Please	e make payable to U o	of D Jesuit)		
I PREFER TO PAY BY CREDIT CARD	: MasterCard	VISA	Discover	AMEX
NAME ON CARD:				
CARD NUMBER:				
CARD NOTIBLIX.				
EXP. DATE;/ CARD SEC	CURITY CODE:			
SIGNATURE:				