|  | Yes, I wish to give back to my<br>alma mater through a donation to the |                           | PAYMENT METHOD:<br>Online: www.uiw.edu/scc<br>Check payable to: UIW<br>Cash |
|--|--|---------------------------|---|
| ADUATING CLASS CAMPAIGN  | Graduating C   | lass Campaign.            | OR  |
|  |  |                           | CHARGE MY:  |
| Name Student ID<br>Address   |  | Discover                  |   |
|  |  |                           | <ul> <li>American Express</li> <li>Visa</li> </ul>                          |
| City Zip   |  |                           | MasterCard  |
| hone ( )   |  |                           | AMOUNT:   |
| E-mail   |  |                           | □ \$20.20 □ \$50  |
| CHECK THE AREA YOU WOULD LIKE TO SUPPORT:  |  |                           | □ \$25 today \$25 on Nov 15   |
| <ul> <li>Scholarship Fund</li> <li>Campus Beautification</li> <li>Other:</li> </ul>                    |  |                           | □ \$50 today \$50 on Nov 15   |
|  |  |                           | SameOther   |
|  |  |                           | (as shown on card)  |
| TOTAL AMOUNT DONATED   |  |                           | Card #  |
| □ \$20.20 Donate in honor of your graduation year to receive your Graduating Class Campaign lapel pin. |  |                           | Security Code   |
| □ \$50 Receive your lapel pin, designate up to 2 honorees and enter raffle for Cardinal Bundle         |  |                           | (on back of credit card)  |
| □ \$100 Receive your lapel pin and recognition on the Honor Roll, designate up to 4 honorees and       |  |                           | Exp. date   |
| enter raffle for Cardinal Bundle.  |  |                           | Signature   |
| □ Other \$   |  |                           | Address   |
| Provide complete inform  | nation on Honorees.  | •                         |   |
| Thank you cards will be<br><i>Honoree 1</i>  | sent on your benan.  | Honoree 2                 |   |
| Name   |  | Name                      |   |
| Address  |  | Address                   |   |
| City   |  |                           |   |
| State  |  | -                         | Zip   |
| Relationship to you:   |  |                           |   |
| If making \$100 or more con  |  |                           |   |
| Honoree 3  |  | Honoree 4                 |   |
| Name   |  | Name                      |   |
| Address  |  |                           |   |
| City   |  |                           |   |
| State  | Zip  | State                     | Zip   |
| Relationship to you:   |  | Relationship to you:      |   |
|  | For m  | ore information, contact: |   |



