



GIFT COMMITMENT FORM

I/we are pleased to support the University of Detroit Mercy with the following commitment..

Pledge Commitment

I/we would like to support the University of Detroit Mercy by pledging the total sum of \$ _____ that I/we would like to be used for:

- Unrestricted Restricted to: _____

Pledge Payment Schedule

My/our commitment will be made:

- With the enclosed sum of \$ _____
With securities: Type _____ No. of shares _____ Transfer date _____
Credit card or debit card

As specified above, I authorize UDM to charge my:

- Visa Mastercard Discover American Express

Card number _____

Exp. date _____ CCV (3-4 digit security code): _____

Name on card _____

Table with 3 columns: With a payment schedule of, Month and Year, Payment. Includes multiple rows for scheduling details.

Matching Gifts

- My/our contribution may be matched by: _____
Employee eligible for match: _____
Enclosed is my/our matching gift form(s). My/our matching gift form will be forwarded.

Signature _____ Date _____
Name(s) _____
Street _____
City _____ State _____ Zip _____
Telephone Home (_____) _____ Business (_____) _____
E-mail _____

Please make your check payable to the University of Detroit Mercy, and return it to:
University of Detroit Mercy, University Advancement, 4001 W. McNichols Road, Detroit, MI 48221-3038
Telephone: (313) 993-1250 • Fax: (313) 993-1549 • www.udmercy.edu/giving
The University of Detroit Mercy will provide periodic reminders about pledges.

Thank you for your commitment.