



# A Campaign Commitment for the Florida Museum of Natural History

I / We pledge to the Florida Museum of Natural History a total of \$ \_\_\_\_\_  
for the following Museum department, collection or purpose: \_\_\_\_\_ .

Please acknowledge and credit this gift as follows:

\_\_\_\_\_  
*Name(s), please print*

\_\_\_\_\_  
*Street* *City* *State* *Zip*

( ) - \_\_\_\_\_ @ \_\_\_\_\_  
*Phone* *Email*

This gift is to be anonymous:  Yes  No

## PAYMENT OPTIONS

### Pay in Full:

Check made payable to **University of Florida Foundation**

Credit Card: Please call 1-877-351-2377 to pay by phone.

### Pledge:

Commitment to begin: \_\_\_\_\_, \_\_\_\_\_  
*Month* *Year*

Pledge Year 1: \$ \_\_\_\_\_

Pledge Year 4: \$ \_\_\_\_\_

Pledge Year 2: \$ \_\_\_\_\_

Pledge Year 5: \$ \_\_\_\_\_

Pledge Year 3: \$ \_\_\_\_\_

*(The UF fiscal year runs from July 1 through June 30.)*

**Pledge Reminders:**  Annually  Semi-annually  Quarterly

### Payroll Deduction (for UF, UFF and Shands employees):

Please send me payroll deduction forms.

## MATCHING GIFTS

I/We intend to apply for a matching gift through my employer(s) to increase the impact of my gift.

\_\_\_\_\_  
*Employer 1* *Employee Signature* *date*

\_\_\_\_\_  
*Employer 2* *Employee Signature* *date*

