Make a Gift



	T INFORMATION First Name:	Middle Initial:	Last Name:	Suffix:	
Address:_					
City:			State:	Zip:	
Email:Phone: \Box		Phone: 🖵 Ce	ıll 🔲 Work 🖵 Home		
DONATIO		(GIFT PAYMENT		
Enclosed is my gift of: \$		I	\$=		
I would like to support:		[Give Online: Visit		
Greatest Need		l	Jefferson.edu/GreatestNeed		
Other:			Give by Credit Card:		
TRIBUTE	GIFTS	•	☐ Visa ☐ MasterCard ☐	American Express 🖵 Discover	
☐ In honor of:			Card Number:		
☐ In memory of:			Expiration Date:/ CVV:		
Please send acknowledgement of my gift to:			Signature:		
Name:			Email:		
Address:			GIVE MONTHLY		
			Charge My Card \$	/ Month	
SHARE YO	OUR STORY!	ĺ	RECOGNITION		
			My gift is anonymous.		
			MATCHING GIFT		
			Double your impact with a corpo from your or your spouse's empl		
			Learn more at Jefferson.edu/MatchingGift .		
			For gifts of securities, pledges and 1-877-JEFF-GIFT.	d other inquiries, please call	
			Contributions are tax deductible	to the extent provided by law.	
			For more information, please cor	ntact	
STORY PERMISSIONS			Annualgiving@jefferson.edu or 2	215-834-1084.	
Please	lease use my story in future publication e contact me before featuring my story t use my note.	ns.	GI ≫ING T	UESDAY	
טס no	it use my note.			26Q206 ²	