



## University at Buffalo Physical Therapy White Coat Fund Giving Form

Please accept my gift of \$\_\_\_\_\_.

You can make your gift online at [buffalo.edu/giving](http://buffalo.edu/giving)!

### Personal Information

First Name\* Middle Name Last Name\*

E-mail\* Telephone (Area Code)\*

Street 1\* Street 2

City\* State or Province\* Zip or Postal Code

Country if other than U.S.

### Payment Method

- My one-time gift is enclosed (payable to UB Foundation, Inc.).
- Charge my entire gift to my credit card.

\_\_\_\_\_  
Name (as it appears on your credit card)\*

\_\_\_\_\_  
Credit Card Number\*

\_\_\_\_\_  
Month/Year Expiration Date\* Security Code\*†

\_\_\_\_\_  
Signature\*

† 3-digit code Visa, MC, Discover; 4-digit code AMEX

\*Required

You can make your gift over the phone by calling toll free  
1-855-GIVE-2-UB.

- Make this an installment gift in the amount of \$\_\_\_\_\_

Credit Card\*\*  Monthly  Quarterly

Bill Me  Monthly  Quarterly

\*\*\$5 minimum charge. Credit cards are charged on/around the 15<sup>th</sup> of each month.

- My/my spouse/partner's employer will match my gift.

Employer: \_\_\_\_\_

For more information: [buffalo.edu/giving/matching](http://buffalo.edu/giving/matching)

- I would like to learn more about including UB in my will.

Please write your message of advice and encouragement to your sponsored student:

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*Invitation to the spring ceremony will be forthcoming.*