

WASHINGTON UNIVERSITY AND YOU: Philanthropic Partners



LEADING *Together*

The Campaign for Washington University

There are many ways you can make a gift to the **Department of Developmental Biology** at Washington University School of Medicine. Your giving supports endeavors that benefit human health. To make a gift or request more information,

please complete and return this card. You may also call the Office of Medical Alumni and Development at **(314)935-9714** for a personal consultation. Thank you for your interest and ongoing support of the School's vital mission.

GIVING OPPORTUNITIES

Please direct my gift to the following:

- The Department of Developmental Biology**
- Washington University Center for Regenerative Medicine (3959-90991)**
- Washington University Zebrafish Facility (3221-92300)**
- Fellowships** to support Pre-doctoral and Post-doctoral students.
- Specific researcher/professor**

- Other** _____
- Please contact me with more information about special giving options**
 - securities real estate life income plans
 - including the University in my estate plans

CONTACT INFORMATION

Name _____
Address _____
City _____
State _____ Zip _____
Daytime Phone _____
E-mail _____

ATTRIBUTION

- I wish to make a **Memorial** gift or a gift in **Honor** of someone. Please designate my gift for:

Notification of your memorial or tribute gift will be sent to the person listed below. (The gift amount will not be indicated.)

Name _____
Address _____
City _____
State _____ Zip _____

- I wish to make an **Anonymous** gift.

GIFT AMOUNT/PAYMENT

- I/We have enclosed a gift of:**
 - \$1,000 \$500 \$250
 - \$100 \$50 \$25 Other _____

(Your gift to Washington University is tax deductible.)

- Please charge my credit card**

MasterCard Visa AmEx Discover

Name on Card _____

Card Number _____

Expiration Date _____

Signature _____

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