

Yes! I/We will support Marquette students.

Total gift amount: \$10,000 \$5,000 \$2,500 \$1,000 \$500 \$250 \$100 Other amount \$ _____

You may designate to more than one fund. If you do so, please indicate amount designated.

- Scholars Fund – Student Scholarships**
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 - College of Health Sciences (2675) \$ _____
 - College of Nursing (2676) \$ _____
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Blue & Gold Fund (133) – Student-athlete Scholarships \$ _____

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Name _____ Class year _____

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In installments of \$ _____ to be paid: Monthly Quarterly Annually Beginning date: ____ - ____ - ____

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On a later date (reminder to be sent): _____

Please check if you are interested in being contacted regarding:

- Gifts of stock Referring a prospective student Other
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Please mail this form to:

Marquette University
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