

Yes! I want to support Idaho State!

Name	☐ ISU Annual Fund			
Address	□ Dean's Excellence Fund			
City, State, Zip	Please specify which college: Arts & Letters, Business, Education, Health, Pharmacy, Science & Engineering, Technology, Graduate School, University Libraries, and Idaho Museum of Natural History			
Phone				
Email	☐ Scholarship Fund			
Employer	☐ Student Enrichment Fund	CREDIT CARD INFORMATION: □ Visa □ MasterCard □ Disc		
— V	☐ Bengal Athletic Boosters	Name on Card		
☐ Yes, my or my spouse's employer will match this gift. I have enclosed the necessary forms. ☐ Other		Card Number		
☐ Yes, I am interested in creating a Planned Gift.		Signature		

I WOULD LIKE TO PLEDGE A GIFT OF: \$ **GIVE IN THE FOLLOWING WAYS: DESIGNATE MY GIFT TO:** Online: ISU.EDU/GIVE

Phone: (208) 282-3470

IDAHO STATE FOUNDATION 921 S 8TH AVE, STOP 8050 POCATELLO, ID 83209-8050

CREDIT CARD INFORM	ATION:			My check is enclosed.
□ Visa □ MasterCard	d Discover	Americar	n Express	
Name on Card			Phone Number	
Card Number		CVV	Expiration	Zip Code
	Signature			