



FLORIDA STATE
UNIVERSITY
FOUNDATION

**Charlotte Seminole Club
Scholarship, Fund #6883
PLEDGE DOCUMENTATION**

Today's Date: _____

Name: _____

Home Address: _____ City _____ ST _____ ZIP _____

Business Address: _____ City _____ ST _____ ZIP _____

Home Phone: _____ Business Phone: _____

Email: _____

07AOCs

Gift Amount: \$ _____

Apply Gift to: Charlotte Seminole Club Scholarship Fund #: 6883

Payment Method:

- Bill me: Now Year End Quarterly Other: _____
 Enclosed is my check made payable to the FSU Foundation
 Charge my credit card MasterCard Visa American Express

Name as it appears on card: _____

Card #: _____ Expiration Date: _____

Payment Schedule:

- Multi-year pledge over _____ years. I would like to pay \$ _____ each year.
 Entire gift in a single payment
 Other (please specify) _____

Signature: _____

My employer matches gifts to higher education: ___Yes ___No

Employer: _____

Employment Title: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

If mailing your gift, be sure to include this form with your payment.

Mail to: Courtney Stombeck, Senior Annual Giving Development Officer
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