



Name: Spouse:
Address: City, State, Zip:
Email: Phone:

I/We would like to make a: [ ] 3-year pledge [ ] One-time gift this fiscal year

3-Year Pledge Details: Please select a total pledge amount, then a payment frequency. You have the option to be billed according to the selection below or to make automatic payments (over).

Table with columns: Total Pledge Over 3 Years, Annually, Semiannually, Quarterly, Monthly. Rows include pledge amounts from \$500 to \$25,000.

GIFT DESIGNATION: If you select more than one gift designation, your gift will be evenly distributed or distributed as you indicate.

[ ] Class of 1970 Memorial Scholarship Gift Amount: \$\_\_\_\_\_

Other Designation(s):

Fund Name: \_\_\_\_\_ Gift Amount: \$\_\_\_\_\_

Fund Name: \_\_\_\_\_ Gift Amount: \$\_\_\_\_\_

PAYMENT OPTIONS:

[ ] Check: Payable to Stonehill College [ ] Credit Card (over)

[ ] DAF: Gift to be made through a donor-advised fund

[ ] IRA: Learn more about making a gift from an IRA (over)

MATCHING GIFT COMPANY: \_\_\_\_\_ [ ] Form enclosed [ ] Form will be forwarded

LUX ET SPES SOCIETY: [ ] I have remembered Stonehill in my estate plans

**CREDIT CARD:**

American Express    MasterCard    VISA

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**3-YEAR PLEDGE PAYMENTS:**

Send me pledge reminders by mail for my 3-year pledge payments

Charge the credit card above automatically for my 3-year pledge payments (sign below)

Use my checking account automatically for my 3-year pledge payments (sign below)

**Please include a voided check with this form and fill in the details below.** The routing number always comes first and is exactly nine digits. The account number varies in length and may appear before or after the check number. Include leading zeros. Omit spaces and nonnumerical characters.

ABA Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Name on Account: \_\_\_\_\_

**PLEASE READ AND SIGN BELOW: Required for recurring credit card or checking account payments.** I hereby authorize my bank or credit card company to charge my account according to the frequency selected and pay Stonehill College the amount indicated above. This authorization will remain in effect until I, Stonehill College or my financial institution revokes it in writing.

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

**Date:** \_\_\_\_\_

**GIFTS FROM AN IRA**

Please consider a gift to Stonehill College with a designation from your qualified IRA

- Easy and convenient way to make a gift from one of your major assets
- Be excluded from your gross income, a tax-free rollover
- Count toward your required minimum distribution
- Donor must be 70 ½ years of age or older at time of the gift
- Transfer must go directly from the custodian of your IRA to Stonehill College
- Contact the custodian directly for their required paperwork and possible time frame restrictions
- Your total IRA gifts cannot exceed \$100,000

**Please let the College know of your intention.** Contact Sharon Doyle, Gift Planning Officer, at (508) 565-1319 or [sdoyle@stonehill.edu](mailto:sdoyle@stonehill.edu) with questions. Learn more: [stonehill.giftplans.org](http://stonehill.giftplans.org)