

Yes I WANT TO *MAGNIFY* MY GIFT—
I WANT TO BEGIN AN ENDOWMENT

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I WANT TO BEGIN AN ENDOWMENT

NAME

ADDRESS _____

CITY STATE ZIP

PHONE () BEST TIME TO CALL

DATE OF BIRTH _____
 M D Y

CONTRIBUTION _____ OR ENDOWMENT _____

*We Must Contact
You By Telephone*

**COMPLETE
AND
MAIL
THIS
CARD
TODAY**

**OR CALL
COLLECT**

(512) 525-9733