



**UWG - College of Social Sciences**

Carrollton, Georgia 30118

(678) 839-5170

**YES**, I want to help the UWG College of Social Sciences raise critical funds for its students and programs. That's why I have enclosed my gift in the amount of:

**\$ 2 5 0**       **\$ 5 0 0**       **\$ 1 0 0 0**       **Other** \_\_\_\_\_

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I have enclosed a check for \$ \_\_\_\_\_ payable to UWG Foundation, Inc.

To charge your gift or utilize other payment options, please see the reverse side of this form. Gifts are tax-deductible to the extent provided by law.

**Please credit my gift to:**

COSS (Area of Greatest Need) \$ \_\_\_\_\_  
Anthropology \$ \_\_\_\_\_  
Criminology \$ \_\_\_\_\_  
Mass Communications \$ \_\_\_\_\_  
Political Science \$ \_\_\_\_\_  
Psychology \$ \_\_\_\_\_  
Sociology \$ \_\_\_\_\_  
Other \_\_\_\_\_ \$ \_\_\_\_\_

I would like to pledge this amount annually (*please complete the payment schedule on the reverse side to indicate when we should remind you of your pledge.*)

**Please remit to:**

UWG Foundation, Inc.  
1601 Maple St.  
Carrollton, Georgia 30118

I prefer to charge my gift to my credit card.

Please enter your number below or visit our website:

<http://www.westga.edu/alumni>

Mastercard®



Visa® **VISA**

American Express®



Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature (required) \_\_\_\_\_

Please send me information about:

- Gifts that pay me income (Charitable Trusts and Annuities)
- Gifts of Appreciated Assets including Stocks & Real Estate
- Creating a Named Scholarship or other Endowment at UWG
- Including UWG in my Will or Trust
- Other ways to give to UWG
- UWG is already part of my estate plan

### PLEDGE PAYMENT SCHEDULE

Please enter the amount and month of your recurring gift (not including matching funds)

January	\$
February	\$
March	\$
April	\$
May	\$
June	\$
July	\$
August	\$
September	\$
October	\$
November	\$
December	\$
<b>Total Pledge</b>	<b>\$</b>

Please update your complete record as necessary:

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Email \_\_\_\_\_

Which is your preferred address?  Home  Business

Employer \_\_\_\_\_

Title \_\_\_\_\_

Business Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Email \_\_\_\_\_