



AUTOMATED GIVING FORM

Use this form to set up your automated gift to Thomas More University by using your credit card, debit card, checking account or savings account

Designation

The Fund for Thomas More University Other _____

Payment Information

I would like to make a recurring gift of \$ _____ per month per quarter per year

Starting Date _____

Please use my Credit Card or Debit Card

B\$À U@ÖÖÀ <d 55>(t)-Td 47>6.554 0Td ()Tj 0.002 T _____ E

CVS Code _____ Name on card _____

Signature _____ Date _____

Please use my checking or savings account (please circle)

Account # _____

Routing # _____

Matching Gifts

My gift will be matched by (please specify company) _____

Donor Information

Name _____ Spouse Name _____

Address _____ City _____ State _____ Zip _____

Telephone _____

Email _____

Alumnus/a < H V 1 R

Class Year _____

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