



ABILENE
CHRISTIAN
UNIVERSITY

*Please designate
my gift to:*

ANNUAL SUPPORT

- Annual Fund
- Hope for the Future Scholarships
- Science-Math Research
- Bible Scholarships
- Missions Seminar Scholarships
- Wildcat Annual Fund (athletics)
- Other _____
- Where needed most
- I would like for someone from the university to contact me.

Questions? Call *Gift Records* at 325-674-2612 or toll-free at 800-588-1514.

Monthly Credit Card Authorization

Until further notice, this will authorize you to honor a draft on my account by Abilene Christian University around the **5th or 20th** day of each month
CIRCLE ONE

IN THE AMOUNT OF \$ _____ PER MONTH.

Charge this monthly gift to:

- VISA MasterCard Discover American Express

Card Number _____

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Signature _____

Security code on card _____

NOTE: The location of the security code varies based on the type of card. Please note if your code is illegible.

VISA, MasterCard and Discover: On back of card, a series of numbers is printed in or near the signature area. The security code is the last three- or four-digit cluster of numbers.

American Express: On front of card, the security code is a four-digit number printed near the embossed card number.

My employer, _____, will match my gift.

Name _____
AS IT APPEARS ON CARD

Credit card billing address _____

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Daytime phone _____ Cell phone _____

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Mail to:

Abilene Christian University
Gift Records, ACU Box 29132, Abilene, Texas 79699-9132