

# FRONT AND CENTRE

THE CAMPAIGN FOR THE UNIVERSITY OF MANITOBA



UNIVERSITY  
OF MANITOBA

First name \_\_\_\_\_ Last name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal code \_\_\_\_\_

Email address (Your tax receipt will be sent to this address) \_\_\_\_\_ Phone \_\_\_\_\_

I prefer a paper tax receipt       For all recognition purposes, I/we wish to remain anonymous

## YES! I WILL TAKE MY PLACE!

I would like to make a gift of \$ \_\_\_\_\_

### Please direct my gift to:

- Indigenous Success Fund       Graduate Student Scholarship Fund  
 Undergraduate Scholarships       Undergraduate Bursaries

I would like to support students in  any field of study or  in the Faculty/College of \_\_\_\_\_  
or

### I would like to support

- Research Excellence Fund       Experiential Education Fund       Enriching Places and Spaces  
 Upgrades to libraries, classrooms and laboratories       Active Living Centre  
 Taché Arts Project       Other \_\_\_\_\_

## PAYMENT METHOD

### Payroll deduction

Staff number \_\_\_\_\_

I am paid:     Bi-weekly     Semi-monthly

Beginning on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (d/m/y)

Until \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (d/m/y) or  ongoing

Signature \_\_\_\_\_

*Charitable donations made via payroll deduction will appear on your T4 Summary from the U of M.*

### Credit card

Visa     Mastercard     American Express

Card number \_\_\_\_\_

Expiry date \_\_\_\_\_ / \_\_\_\_\_

Cardholder name \_\_\_\_\_

One-time     Monthly     Quarterly     Annually

Beginning on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (d/m/y)

**Cheque** made payable to the University of Manitoba and mailed to the address below

## FURTHER INFORMATION

An official tax receipt will be issued under Revenue Canada Taxation Registration #11926-0669-RR0001. Monthly donors will receive one receipt at year end for all monthly gifts. This personal information is being collected under the University of Manitoba Act and will be used to facilitate communication and assist in our advancement efforts. It will be used only for the purpose(s) for which it is collected, unless you consent or we are authorized to do so under the Freedom of Information and Protection Privacy Act (FIPPA). For more information, contact the Access and Privacy office at 204 474 9462.

### Please return completed form to:

University of Manitoba, Alumni and Donor Relations  
200-137 Innovation Drive  
Winnipeg, Manitoba R3T 6B6 Canada

### For more information, contact:

Jennifer Triggs in Alumni and Donor Relations  
Phone: 204 474 7120  
umanitoba.ca/giving/fsr  
donor.relations@umanitoba.ca