

14 E. 15th Avenue Columbus, OH 43201 614-292-2189 Phone 614-247-6614 Fax

> giving@osu.edu giveto.osu.edu

DONOR INFORMATION:

Name					
Address		City	State _	Zip	
E-mail		Home Phone	Cell Ph	one	
DESIGNATION(S) TO TI To search for more funds, visit giveto.					
GREATEST PRIORITY	\$	College of Medicine (312022)	\$	Marion Campus (306681)	
\$ Greatest Priority (999999)	\$			Mansfield Campus (302990)	
SCHOLARSHIPS AND FUNDS	\$	College of Optometry (309284)	\$	Newark Campus (308118)	
\$ Access to Success Scholarships (313872)		College of Pharmacy (301069)	OTHER ARE	OTHER AREAS	
Honors and Scholars (313890)	\$	College of Public Health (306584)	\$	Alumni Association (301278)	
S Study Abroad (301948)		College of Social Work (305446)	\$	Diversity and Inclusion (302900)	
CADEMIC AREAS	\$	College of Veterinary Medicine (302404)	\$	Global Initiatives (313367)	
College of Arts and Sciences (310982)		John Glenn School of Public	\$	Parents Support (307712)	
5 Fisher College of Business (30147		Affairs (301696)	\$	Student Life (302941)	
College of Dentistry (308642)	\$		\$	University Libraries (303478)	
Dental Hygiene (303613)	\$,	\$	Veterinary Medical Center (308987	
College of Education and Human Ecology (301705)		\$ School of Environment and Natural		Wexner Center for the Arts (309257	
		Resources (306591) Health and Debabilitation Sciences (202421)		IEDICAL CENTER	
College of Engineering (303752)		Health and Rehabilitation Sciences (302431) PUSES	\$	Wexner Medical Center (313504)	
College of Food, Agricultural, and Environmental Sciences (303008)		Agricultural Technical Institute (ATI) (30334F)	OTHER		
Moritz College of Law (305399)		Lima Campus (302604)	\$	Other:	
PAYMENT OPTIONS:					
Online Visit gi	Visit giveto.osu.edu/makeagift				
Check enclosed Make	Make checks payable to The Ohio State University Foundation				
Credit card Choos	Choose your credit card option:				
□lau	☐ I authorize The Ohio State University to charge my credit card in the amount of \$				
Pre-authorized giving is to emain in effect until The Ohio Pe	per month on the 1st of the month* 15th of the month*				
tate University Foundation	☐ This is a one-time gift of \$				
otification of its termination Compl	Complete your credit card information:				
om you. Notification may be nade by writing to The Ohio tate University Foundation, O Box 710811, Columbus, OH					
	Credit card number Expiration date				
learly itemized on your credit	ame on card_				
Signat	ure			Date	