

PLEASE DIRECT MY GIFT TO THE SAFETY AND HEALTH MANAGEMENT PROGRAM:

SHM Program Support (fund #01281800)

Brian and Elizabeth Clarke ASSE Student Section Endowment (fund #01055300)

Ron Hales Scholarship (fund #01107800) **Charles Patton Scholarship** (fund #01152900)

Enclosed is my check in the amount of \$ _____ (make checks payable to the CWU Foundation).

Charge a one-time gift of \$ _____ to my credit card.

Please transfer a monthly gift of \$ _____ to my credit card starting _____ (mo/yr) to _____ (mo/yr) or _____ until further notice.

(CWU will destroy the following information immediately after processing.)

Visa/MasterCard # _____ CID # _____ Expiration Date _____

Name on card _____ Authorized Signature _____

Your contribution is tax deductible to the extent provided by IRS regulations. The CWU Foundation is currently registered with the Washington State Charities Program and financial information may be obtained by calling 800-332-4483 or 360-725-0378. Note: Our fiscal year ends June 30. CWU is an EEO/AA/Title IX Institution. TDD 509-963-2143.

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