

## Giving to Lycoming College

Thank you for your gift to the Lycoming Annual Fund.

Please print this form, complete it and send it with your check (payable to Lycoming College) to:

Lycoming Annual Fund  
Lycoming College  
700 College Place, Box 165  
Williamsport, PA 17701

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

If applicable: Maiden Name \_\_\_\_\_ Graduation Year \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Gift Amount \_\_\_\_\_

Designation (please check):

Where needed most  Financial Aid  Academic Programs  Student Services

This gift is in response to:

an email I received  a letter I received  
 a phone call I received  unsolicited

*You can double or triple your gift if you or your spouse works for a **matching gift company**.  
Please contact your human resource department to find out how simple it can be!*

Help us keep your business information up to date:

Company Name \_\_\_\_\_ Job Title \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Business Email \_\_\_\_\_