Thank you for your support!



Name (Please print)		Class		
Firm/Organization				
Address City				
Country				
Home Phone E-mail	Business Phone			
	□ Please update my name and/or address.	Please send mail to my: □ Ho	ome 🗆 Busine	ss
•	e a gift in support of McGeorge School of L		(*Dean's Cou	ncil levels)
□ This is a payment o	on an existing pledge.			
Payment Method				
-	McGeorge School of Law.			
1 ,	line at alumni.mcgeorge.edu/makeagift; or col	mplete the following section, and	return to the a	iddress below
	\$ on my: \text{ Personal Credit C}		return to the t	address below.
_	□ Visa □ MasterCard □ American Express	= ·		
• •	□ Once □ Monthly □ Quarterly □ Ann			
Begin charg	es on the following date	_		
	□ End charges so that my contribution to the			
Card Name	□ Continue the above charge until I revoke i	,		
	er t Address		•	
_				
	s Name			
	endation through my donor-advised fund at_			
	, payable in installments of \$ d me:			
	or Retirement Distributions: Please call the Ac	•	•	
J Stock, Property, C	or Reurement Distributions: Flease call the Ac	ivancement Office at 916./39./30		
Wish To Designate	e My Gift For The Following Purpose:			
		McGeorge Diverse Bar Exam Sup		· ·
	gram			
Oonor Recognition	and read	-	J I/W/o wish -	remain anonyme
-	ould read:			-
	or or memory of note that the second of th			
'lease send a gift ackı	nowledgment to: (Name & Address)			
Employer Matching	Gift Program:			
	=	om		(Company