



YOUNGSTOWN STATE UNIVERSITY
FOUNDATION

Name _____ Grad Year(s) _____

Spouse _____ Grad Year(s) _____

Address _____

City/State/Zip _____

Mobile/Home Phone _____ E-mail _____

Business Name _____

Title _____

Business Address _____

City/State/Zip _____

Business Phone _____ E-mail _____

Gift Designation:

**Donald W.
"Squire" Hurrelbrink
Scholarship**

Please turn over for detailed information

Make checks payable to YSUF

I wish to **make a tax-deductible gift** to the YSU Foundation in the amount of \$ _____ *(Make checks payable to YSUF)*

I wish to **make a tax-deductible pledge** to the YSU Foundation in the amount of \$ _____

Initial payment of \$ _____ enclosed, with the remaining payments to be made

- Annually Quarterly
 Semi-annually Monthly

Make your gift **online** at www.ysufoundation.org

YSU Foundation can also expect to receive a **matching gift** from the following company/organization:

Please alert your company, or send YSU Foundation a matching gift form.

If you wish to fulfill your commitment with stock, please provide the following information:

Brokerage Firm _____

Description of Security _____ Number of Shares _____

- I have included the YSU Foundation in my estate plans.
 Please send me information on making provisions for the YSU Foundation in my estate plans.

