

ΑΣΦ

ALPHA SIGMA PHI

alphasig.org

AUTO PHI SOCIETY

GIFT DETAILS

I, _____, commit to \$ _____

Monthly

beginning on ____/____/____

Quarterly

and be On-Going OR Ending in 3 Years 4 Years 5 Years

Annually

GIFT NOTES / INSTRUCTIONS

PAYMENT INFORMATION

VISA Mastercard Discover AMEX

Name on Card: _____

Card Number: _____

Expiration Date: ____/____ Security Code: ____

Signature: _____

PERSONAL INFORMATION

Name: _____ Cell Phone: _____

Email: _____

Address: _____

Apt/Unit: _____ City: _____

State: _____ Zip Code: _____

Date: ____/____/____

Alpha Sigma Phi Foundation is a 501(c)3 non-profit organization. Your donation may qualify as a charitable deduction for federal income tax purposes. Please consult your tax advisor or the IRS to determine whether your contribution is deductible.

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