

LSUS Annual Support Form

I am pleased to provide the following gift:

\$25 \$50 \$100 \$ 250 \$500 Other

Or

I am pleased to support the LSUS Foundation Chancellor's Circle*:

Pilot - \$1000

Captain - \$1,500

Yachtsman \$2500

Commodore - \$5000

Admiral \$10,000+

*Donations of \$1,000 or more qualify for membership in the LSUS Foundation. LSUS Faculty and staff members and individuals under the age of 40 may participate for a gift of \$500.

My tax-deductible contribution of \$_____ will be paid as follows (check one):

Check enclosed (payable to LSUS Foundation)

Bill me monthly quarterly semi-annually

Payroll deduction (LSUS faculty/staff only)

Credit Card (Please check one) MC VISA Discover AMEX

Card No. _____

Exp. Date _____

Signature _____

My company/organization matches charitable contributions. I have provided a completed Matching Gift form. (Matching Gift forms can be obtained from your Human Resource Office.)

Please return both pages of this form with your check (if applicable) to:

LSUS Foundation
One University Place
Shreveport, LA 71115-2399

*****Please Fill Out Page 2 of This Form.**

Please Provide the Following Confidential Information for Our Files:

Name: _____

Spouse Name: _____

Home Address: _____

Employer Name: _____

Employer Address: _____

Occupation/Title: _____

Home Phone: _____

Fax: _____

Email: _____

Work Phone: _____

Fax: _____

Email: _____

Year of Graduation (if applicable): _____

Degree Earned from LSUS: _____

Please Send Me Additional Information On:

_____ Endowments for scholarships.

_____ Endowments for professorships and chairs.

_____ How to make gifts of stocks or other securities.

_____ Ways to contribute to LSUS through my will.

_____ Ways to contribute to LSUS through life insurance.

For more information call the LSUS Development Office at 318-797-5257.