

I SUPPORT OBERLIN COLLEGE WITH MY GIFT OF \$ _____

Please designate as follows:

\$ _____ Area of Greatest Need

\$ _____ Scholarships

\$ _____ Other

Check enclosed (*payable to Oberlin College*)

Please charge my: MasterCard Visa AMEX Discover

Name as it appears on card: _____

Card # _____

Expiration date: _____

Signature: _____

Your signature acknowledges the terms of your pledge and/or validates your credit card payment.

Name(s): _____

Street address: _____

City: _____ State: _____ ZIP: _____

Class year(s): _____

Phone: _____

Email: _____

My gift is in honor/memory of: _____

- Matching gift form enclosed
- Oberlin is in my estate plans
- I would like information about how to include Oberlin in my estate plans.

For questions, to set up a recurring gift, or for stock transfer instructions, call (800) 693-3167.

Mail form to:

Oberlin College
PO Box 72110
Cleveland, OH 44192-0002