

# Center for Drug Discovery

## Letter of Commitment

In recognition and support of the University of Georgia  
Center for Drug Discovery  
(All gifts may be pledged)

- I/we intend to personally contribute \$ \_\_\_\_\_ per year for \_\_\_\_ years, beginning \_\_\_\_\_  
 Corporate/Foundation contribution of \$ \_\_\_\_\_ per year for \_\_\_\_ years, beginning \_\_\_\_\_  
I would like to receive a pledge payment reminder in \_\_\_\_\_ (month)  
Gift Designation: \_\_\_\_\_ in the amount of \$ \_\_\_\_\_

### Annual Gift

I will continue or initiate support of the Center for Drug Discovery in the following way:

- Annual Gift \$ \_\_\_\_\_ per year for \_\_\_\_ years = \$ \_\_\_\_\_

### Matching Gifts Information

(Please see matching gift information at [www.externalaffairs.uga.edu/os/pages/matching](http://www.externalaffairs.uga.edu/os/pages/matching))

- My personal gift(s) will be matched by \_\_\_\_\_  
(name of corporation/foundation)

Total Gifts: \$ \_\_\_\_\_

### Planned Gifts/Estate Commitments

I am considering a planned gift/estate commitment to the UGA Center for Drug Discovery. Please have a Gift Planning Officer contact me concerning this gift. I understand a documented planned/estate gift qualifies me for membership in the University of Georgia Heritage Society.

### Donor Information/Authorization

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Company/Foundation Name (if a corporate/foundation gift): \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ Email address: \_\_\_\_\_

Name as to appear on Donor Appreciation and/or Heritage Society plaque: \_\_\_\_\_

Donor Signature(s): \_\_\_\_\_

Charitable gifts made in support of the University of Georgia's academic programs and projects should be made payable to:

**The University of Georgia Foundation**

### For more information please contact:

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