



Libraries and School of Information Studies

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Pledge

I/We intend to make a total gift (excluding any anticipated matching gifts) of \$ _____

It is my/our desire to pay this pledge over a period of _____ years.

Please remind me/us: annually semi-annually quarterly monthly

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Please print and mail this form and your payment to: Purdue University Libraries ADV, 504 W.State Street, West Lafayette, IN 47907.

Questions? Call (765) 494-2806 or e-mail SARysell@prf.org.