

AN EASIER WAY TO MAKE YOUR GIFT TO MICHIGAN MEDICINE

Why make a recurring gift?

The **ease and convenience** — Recurring gifts are charged automatically to your credit card each month (until you tell us to stop) on or around the 10th.

The **impact** — By reducing postage and mailing costs, recurring gifts enable us to spend less on overhead — directing more money toward the programs you support.

The **difference** — Spreading your support over time is easier on your budget and ensures ongoing, reliable revenue for the program(s) that are important to you.

What payment options can be used?

Gifts can be made through your checking account (ACH) or credit card. We accept Visa, MasterCard, American Express and Discover.

Is a recurring gift reliable?

Yes, it is safe and secure. The University of Michigan is PCI compliant and stores only enough of your credit card information to complete each transaction.

How do I set up a recurring gift?

Complete the form below for either credit card or ACH payments and return it to Gift and Records Administration.

When will I receive a receipt?

You will receive one consolidated receipt for your recurring gift. Receipts are sent out in January for gifts made the previous year.

What happens if I have an updated account or credit card or I want to modify my gift?

If you change your checking account or credit card please submit a new form. Please call the Gift Help Line at 888-518-7888 if you wish to change accounts or cancel your participation.

To begin your recurring gift, complete this authorization form, attach a **voided*** check (if paying through your checking account) and return it to the following address:

University of Michigan
Gift and Records Administration
3003 S. State Street, Suite 8000
Ann Arbor, MI 48109-1288

Name _____

Address _____

City/State/ZIP _____

Phone _____ Email _____

Please designate my gift to: _____

Until further notice, I authorize the University of Michigan to charge/deduct from my account as follows:

Amount: \$_____ on the 10th of each month

Frequency: Monthly Quarterly Annually

ACH (**Voided*** check attached)

Credit Card

Visa AMEX MasterCard Discover

Account Number _____

Exp Date _____

*If you prefer, a photocopy of a **voided** check can be used for account verification.