

Annual Fund

GIVING

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Graduation Year: _____ Faculty/College: _____

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OR

I would like to designate my gift to the following college(s) or faculty(ies):

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Signature _____

My employer has a matching gift program. Matching form Enclosed Will be sent

Please send me information about:

- Corporate matching gifts
- Including U of T in my will
- Trust and estate planning
- Presidents' Circle

Please return this form and your donation by mail or fax to:

**Mail: Annual Fund Office
J. Robert S. Prichard Alumni House
University of Toronto
21 King's College Circle
Toronto, Ontario, M5S 3J3**

Fax: 416-978-3978

Tel: 416-978-2173 or 1-800-463-6048

E-mail: annual.fund@utoronto.ca

Website: www.giving.utoronto.ca

Charitable Registration # 108162330 RR0001

A tax receipt will be sent to you by mail.

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