

Honor with Books

Donor Information:		Spouse/Partner Na	me:	
Name: Spouse/Partner Name: Email:				
☐Home (or Business		□Cell □Home □Work	
Relationship: 🗖 Alumni (Yea	ar:) 🗖 Faculty/Sta	aff □Friend □Parent [Student □ Other	
Please provide the following information to be represented on the digital bookplate:				
☐In Memory of		☐ In Celebration of	,	
Honoree Name:			UCI Class of:	
On the occasion of:				
☐ graduation☐ anniversary	☐retirement ☐wedding	☐ memorial ☐ birthday	□ promotion □ other	
Панниствату	wedaing	bii tiiday		
Gift from name:				
Please indicate the subject	area of the book you	wish to be plated:		
□Arts	Biology	Business Mgmt.	·	
☐ Education☐ Physical Sciences	☐ Engineering☐ Social Ecology	☐ Humanities☐ Social Sciences	Medicine	
Please send notification of my gift to:				
Name:				
Mailing Address:	Email:			
	Phone:			
Payment Information: Fund	d #3544			
\$125 per volume or 5 volumes for \$600				
, · ·	eck made payable to U : card:	CI Foundation ☐ Business credit card	iscover	
Card Number:			Expiration Date:	
Billing address (if different than above):				
Authorized Signature:				

Mail completed form and payment to: