



UT Extension

Northeast Tennessee Master Gardener Endowment

Name _____ Spouse _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Daytime Phone _____

I/We would like to contribute to the University of Tennessee Foundation

(Please make checks payable to the University of Tennessee Foundation, Inc.)

My/Our gift is designated for: **___ Northeast Tennessee Master Gardener Endowment (MASTE_06)**

Or other fund: _____

___ I/We pledge \$ _____ a year for _____ year(s) for a total of \$ _____.

Please remind me/us of our pledge _____ annually
_____ semi-annually
Beginning: _____ quarterly

Indicate month/year

___ Enclosed is the first payment on my/our pledge.

___ I/We would like to make a gift via Credit Card. Circle one: Visa MasterCard Discover.

Credit Card #: _____ Expiration Date: ____/____

___ Enclosed is a one-time gift of \$ _____.

Signature(s) _____ Date _____

The Institute of Agriculture

Questions: Please contact Tom Looney at 865-974-8622 or tom.looney@tennessee.edu

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