

## Please mail to:

Winona State University Somsen Hall 204 PO Box 5838 Winona, MN 55987

Name:	Wanian ID# (artismal).		
	Warrior ID# (optional):		
Address:			
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Winona State University affiliation(s) (Please check a	ıll that apply)		
☐ Winona State former student, Class:	Parent of a former student		
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☐ Check enclosed (Make check payable to: Winona Credit Card:	months, for a total gift of \$  State University.)		
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		$\square$ is enclosed $\square$ will be sent later	
		http://www.matchinggift.com/winona/	
	Please Notify (name & address):	☐ I have included Winona State	
		University in my estate plans	
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"In this world it is not what we take up, but what we give up, that makes us rich."

Henry Ward Beecher

## Thank you for your gift

www.winona.edu/foundation

If you have any questions about this form, please contact us at (507) 457 – 5020, or by emailing us at wsufoundation@winona.edu. Information provided on this form will be used by Winona State University for the purpose of correctly crediting your gift. Personal information is used for Winona State University related business only.