

Minority Affairs Committee (MAC) Endowment Fund



- Please join us in our efforts to establish the MAC Endowment Fund to support diversity and inclusivity in AIChE®, the profession, and society at large. (The goal is to raise a minimum of \$300,000 for this fund, which will become endowed and permanently restricted as soon as it reaches a minimum amount of \$50,000.)
- Your donation will help provide a stable and secure source of funding for scholarships, to help MAC maintain the pipeline and support for future leaders.
- All donors will be recognized nationally by AIChE.
- Spending of the endowment will be in accordance with guidelines of prudence established by NYPMIFA.

Making a donation is easy. Choose the method that is best for you:

✓ By mail:

AIChE Foundation

Attn: Stephanie Viola

120 Wall Street, 23rd Floor

New York, NY 10005

(Checks should be made payable to:

AIChE Foundation)

✓ By mail: Stephanie Viola, stepv@aiche.org

✓ By Phone:

Call the AIChE Member Service Center @

1-800-242-4363 or

1-203-702-7660 (outside the U.S.)

✓ By Fax:

Fax completed form with credit card information to: 1-646-495-1505

I would like to support the MAC Endowment Fund by making a gift of:

\$2,500

\$15,000

\$5,000

\$25,000

\$10,000

Other Amount \$ _____

An outright gift in the amount shown above

A multi-year pledge to be paid in scheduled payments of (please choose one):

Two Annual Installments: I have enclosed a check or credit card payment in the amount of \$ _____, as one of two installments toward the fulfillment of this pledge.

Three Annual Installments: I have enclosed a check or credit card payment in the amount of \$ _____, as one of three installments toward the fulfillment of this pledge.

Four Annual Installments: I have enclosed a check or credit card payment in the amount of \$ _____, as one of four installments toward the fulfillment of this pledge.

Other payment schedule or information (please define):

Signature _____ Date _____

DONOR CONTACT INFORMATION:

Name: _____

Address: _____

City, _____ State _____ Zip _____

Country _____ Phone: _____

Email: _____

PAYMENT INFORMATION:

Check enclosed (check payable to AIChE Foundation, please specify for the MAC Endowment Fund)

Please charge to my credit card:

MC Visa Amex Discover

Card number _____

Expiration Date _____ CVW number/ security code _____

Billing Address (if different from above): _____

Signature: _____

I would like to contribute in the form of stocks. (Please call Stephanie Viola, Director, Development of the AIChE Foundation, 646-495-1342)

Please allow this gift to remain anonymous

My company will match this gift (please contact me for details)