



# UC San Diego

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## HEALTH SCIENCES

I/We want to make a charitable gift in support of “Ophelia Blue Eyes” for the purpose of Down’s syndrome research at UCSD.

I/We hereby agree to make the following gift:

\$ \_\_\_\_\_ **Pledge**

*Payable as follows:*

\$ \_\_\_\_\_ *annually over* \_\_\_\_ *years (5-year max)*

\$ \_\_\_\_\_ **Outright Gift (cash, credit card or marketable securities)**

**Credit Card #** \_\_\_\_\_ **Exp:** \_\_\_\_\_

**Type:**       **MC**                       **Visa**                       **AMX**

**I am interested in making a planned or estate gift to support Ophelia Blue Eyes.**

Make checks payable to the **UC San Diego Foundation** and mail to Andrea Davidson, Director of Development, Health Sciences, 200 West Arbor Dr. #8225, San Diego, CA 92103-8225. If you are interested in making a gift of stock or have any questions please contact Andrea at 619-543-3605 or [adavidson@ucsd.edu](mailto:adavidson@ucsd.edu).

Signed: \_\_\_\_\_ (donor)

\_\_\_\_\_ (spouse)

\_\_\_\_\_  
Please print your name(s) as you would like it to appear for recognition purposes

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_