Seoul National University Foundation, Inc. (New Library Building & Renovation) Donation

Name of the donor					
Relationship to SNU	Alumni	College(Department)	Year of graduation:		
	Parent	Name of student:	College: Year of entrance:		
	Faculty	Department:	Title:		
	Other				
Occupation	Name of oc	cupation:	Department: Title:		
Address					
(Recipient of mail)					
Contact	Home:		Office:		
	Mobile:		E-mail:		
Amount of donation	\$				
Method of payment	Payment in full (Date of payment: day/month/year)				
	Payment in installment (times) year month ~ year month				
	Deposit without checkbook		Bank: Shinhan Bank, Little Neck Br. Account No. 115-6-000805 (Routing No.:026011963)		
	Credit card		Card type: □ VISA □ Mastercard □ American Express Card #:		
			Expiration date:(mm/yy)		
			CVC #: Holder Name:(signature)		
	Check enclosed		Name of bank: Account no.:		
			Depositor:		
Naming service	Please write information or phrases you would like to engrave on the nameplate.				
Preferred use of donation	Use of do	nation	st to SNU Library(Renovation Fund for Library Facility) he entire amount according to the donor's wish		
	Name of fund (Only for contracted amounts over US\$ 100,000):				
♣ SNU Foundation, Inc. is a 501(c)(3) non-profit organization, and all gifts are deductible to the extent provided by the law.					
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I agree that I will donate the above-mentioned amount to participate in aiding the Seoul National University Foundation, Inc..

Year	Month	Day
Donator		(signature)