



MID-PACIFIC FUND

Name _____ Spouse _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ E-mail _____

Total Enclosed: \$ _____

Check attached (*payable to Mid-Pacific Institute*)

Charge my Amex/Disc/MC/Visa # _____ Exp. _____

Billing Address _____ CCV _____

If different than above

Charge Signature _____ Date _____

required

Total Pledge: \$ _____

Pledge Signature _____ Date _____

required

Balance \$ _____ to be paid: Monthly Quarterly

of installments _____ Start date _____

Send pledge reminders OR Automatically charge my credit card

Please check here if you wish to be Anonymous in gift recognition publications

Please mail all forms and gifts to:

Mid-Pacific Advancement Office
2445 Ka'ala Street
Honolulu HI 96822

Contact Vanessa Kau at 808.973.5052 or vkau@midpac.edu with any questions.

Mahalo for your continued support of Mid-Pacific!