

The Norbert B. Enzer, M.D., Endowed Lectureship in Psychiatry

I/We wish to support the Norbert B. Enzer, M.D., Endowed Lectureship in Psychiatry with a gift of \$_____.

I/We wish to support the Norbert B. Enzer, M.D., Endowed Lectureship in Psychiatry with a pledge of \$_____.
Enclosed is my/our first pledge payment of \$_____.

Send pledge reminders: Annually Quarterly Semi-annually Monthly

Pledge duration: 12 months 24 months 36 months

Name: _____

Address: _____

Daytime Phone: _____

Please make checks payable to **Michigan State University**
(A \$5,000 gift qualifies donor for sponsorship of one Enzer Lectureship. Gifts of \$1,000 or more may qualify donor for MSU Gift Club Membership)

Please **charge** my/our gift to: MasterCard VISA

Card number: _____

Expiration Date: _____

Card Holder's Signature: _____

Please return form to:
University Development
Michigan State University
4700 South Hagadorn Road, Suite 220
East Lansing, MI 48823
517/355-8257