

## Islet Cell Transplantation Fund

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

### GIVING LEVELS:

Dean's Club Member-----\$150  
Dean's Club Fellow Member-----\$250  
Dean's Club Distinguished Fellow Member-----\$500

Bronze McMicken-----\$1,000  
Silver McMicken-----\$2,500  
Gold McMicken-----\$5,000  
Founder Level-----\$10,000

In support of the Islet Cell Transplantation Fund, I am/we are pleased to:

- Enclose a gift of \$ \_\_\_\_\_
- Establish a pledge of \$ \_\_\_\_\_ Payable annually at \$ \_\_\_\_\_ for \_\_\_\_\_ years
- Please charge my gift on: \_\_\_ VISA \_\_\_ MasterCard \_\_\_ Discover \_\_\_ American Express

Card# \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_



Make checks payable to *UC Foundation/ Islet Cell Transplantation Fund*, and return to UC c/o Islet Cell Transplantation Fund, P.O. Box 670544 Cincinnati, OH 45267-0544