

FORM U — CONTRIBUTION

 ${\it State~of~Nebraska--County~of~Lancaster}$

PLEASE PRINT Full Legal Name:			
Street Address:			-
City, State:	_ZIP:		
Phone #:			
E-mail Address:			
Amount of Contribution:			
SEG or Candidate Contributing To:			
COMPLETE IF YOU ARE A STUDENT	AT UNL		
NUID #: College:			
Are you a candidate (circle)?	Yes	No	
READ AND SIGN I do herby certify that this contribution to to any other account. I understand that I must and that they must submit this form with the	t provide this fo	rm to the SEG/Car	
Legal Signature of Donor		Date	