

# The University of Tokyo, New York Office, Inc. Donation Form

Month    Day    Year  
Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Donor information

Name of the organization \_\_\_\_\_

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Administrator

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Department \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

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Phone \_\_\_\_\_ FAX \_\_\_\_\_

We / I would like to make a donation to The University of Tokyo New York Office as described below.

Donation Amount: US\$ \_\_\_\_\_

Please specify a project you would like to support (if any).

Next generation vaccines against influenza

We / I wish to Remain Anonymous

**Thank you for your generous gift to The University of Tokyo New York Office!**

Please mail the completed form to:

The University of Tokyo New York Office  
145 West 57<sup>th</sup> Street 21<sup>st</sup> Floor, New York, NY10019  
Tel: +1(212)582-9800, Fax: +1(212)582-9789

We will contact the administrator for payment instructions upon arrival of the documents.

If you have any questions, please contact us at [utny@iis.u-tokyo.ac.jp](mailto:utny@iis.u-tokyo.ac.jp) or +1(212)582-9800.

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