

2019 PLEDGE FORM (July 1, 2019-June 30, 2020)

DONOR INFORM	ATION (please)	print or typ	pe)			
NAME						
ADDRESS						
CITY, STATE, ZIP						
PHONE						
EMAIL						
PLEDGE INFORM	IATION					
			made (check one ple	_	t budget year starting	
□ one-time	payment □ wee	kly □ mo	onthly \square quarterly	□other		
• I (we) plan to ma	ake this contribu	tion in the	form of:			
□ cash □ c	heck □ stock/se	curities [☐ other			
						
Signature(s)		Date				
This pledge is a statemen	at of intention that re	mains valid	until modified in writing	3.		
Office use: Office C	Canvass Realm	T.Y.	Payment check #	Date received	Amount	