

2024 Annual Campaign Pledge Card

Campaigner Name _____ Branch _____

Name of Donor(s) or Contact if Organization _____

Organization Name if Applicable _____

If the donor is not currently on your prospect summary sheet or if the information is not correct, please provide complete mailing address.

Street/City/State/Zip _____

Email _____ Phone _____

Amount of Gift _____

Billing Information

_____ Payment has been received and submitted to Executive Director _____ Invoice – single payment

_____ Invoice - quarterly payments _____ Invoice – monthly payments

Please begin invoicing in this month _____

Corporate Matching Gift

_____ Gift is eligible for a matching gift of equal value.

_____ A portion of gift is eligible for a matching gift as indicated below.

_____ Gift is not eligible for a matching gift.

If applicable, a corporate matching gift is available from the following company and the amount eligible is:

Acknowledgement Information

_____ Gift is confidential.

_____ Please use the following recognition name(s) as indicated:

Print & Banner Acknowledgement _____

Banner location(s) for gift of \$1,000 or more

_____ Caylor-Nickel _____ Central _____ Jackson R Lehman Jorgensen _____ Parkview

_____ Renaissance Pointe _____ Skyline _____ Whitley _____ No Banner needed

If donor currently has a banner, it is indicated on your prospect summary sheet.