

GIFT PLEDGE FORM

PLEDGE AMOUNT					
I/we pledge to give \$	(excluding d	any anticipated mo	atching gifts)		
DESIGNATION \$ Endowment (held \$ Annual Fund \$ Other (specify) Other (specify) TGTHR will mail pledge statements be you will be able to pay by check or cree-	ased on the schedule	you determine is be	est for you.	A re re verille :	
Frequency of payments (select o Duration of payments (number of Installments of \$	f years)				
Donor Signature			Date		
TGTHR Staff Signature					
Non-cash (Stock/Mutual fun- Please specify so our accounting ted Check (payable to TGTHR)	ds/etc): am can reach out to you	u with additional instruc	ctions if needed		
Credit card or debit card As specified above, I author Visa Mastero Card number Name on card Signature	card Discov	er Americo Exp.	. date		
MATCHING GIFTS I anticipate that my gift will be	matched by (spec	ify company)			
DONOR(S) INFORMATION Name pronoun Street City Zip	 	Other: spec	p my name c		
Email Primary					