

BUILDING INDEPENDENT FUTURES

Project Capital Campaign Pledge Form

DONOR INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Signature: _____

GIFT/PLEDGE INFORMATION

Please keep this gift/pledge anonymous.

I/we pledge a total of \$_____ to be applied in its entirety to the *Building Independent Futures* campaign

My/our gift balance will be paid in the amount of \$_____ over a period as follows:

Monthly Quarterly Semi-Annually Annually

A single gift. Payment information is below.

CHECK INFORMATION

Enclosed is my check for a tax-deductible gift of \$_____ made payable to **Independent Living, Inc.**

CREDIT CARD INFORMATION

Please charge my tax-deductible gift to my credit card: MasterCard Visa Discover

In the amount of \$_____ Cardholder's Name: _____

Card Number: _____

Please charge my card for \$_____ /month for _____ months.

Expiration: _____ / _____ Security Code: _____

Cardholder's Signature: _____ Date: _____

Contributions are tax-deductible. Independent Living, Inc. is a 501(c)(3) tax-exempt, nonprofit organization.



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