

Our Campaign for

TRANSFORMING CHILDREN & FAMILIES

CAPITAL CAMPAIGN PLEDGE FORM

DONOR INFORMATION (please type or print):

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE home work cell _____ EMAIL _____

ONE-TIME GIFT \$ _____

PLEDGE AMOUNT \$ _____

PLEDGE FULFILLMENT (all payments must be completed by December 31, 2024)

My/our pledge will be made as follows:

2023: \$ _____ 2024: \$ _____

Payment schedule (circle one): **Annually/Semi-Annually/Quarterly/Monthly** starting on ____ / ____ / ____ (day/mm/yy).

My gift will be matched by _____ company/foundation/family.

PAYMENT:

Check First/full payment is enclosed

Please charge my credit card (for each billing cycle): Visa MasterCard AMEX

Name on card _____

Card number _____

Exp. date _____ Security Code _____

Stock Transfer (please notify us before each stock transfer)

I plan to make a grant recommendation for the amount(s) outlined above from the following Donor-Advised Fund or Private Foundation: _____

RECOGNITION:

Name to use in all acknowledgments: _____

I wish this gift to be anonymous

In memory/honor of: _____

DONOR SIGNATURE

DATE

Please make checks, corporate matches, and stock transfers payable to: Joya Child & Family Development.

Donations are tax-deductible to the extent allowed by the law. **Tax ID # 91-0863163**

Your gift to *Our Campaign for Joya* supports capital costs. Any funding received that exceeds capital costs will be used to support operational costs to maintain and grow the Program. *Questions?* Contact Teresa Conway, Campaign Manager at 509-326-1651 or teresa.conway@joya.org.