

# Capital Campaign PLEDGE FORM



## Donor Information

Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_

State & Zip Code: \_\_\_\_\_

Phone (Home): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_

## Pledge Information

I (we) pledge a total of \$\_\_\_\_\_ to be paid to **R**evere Local Schools. Please send me a pledge reminder \_\_\_ quarterly \_\_\_ yearly until paid in full.

**Amount to be paid:** For pledges over \$\_\_\_\_\_, they can be paid in two installments.

Pledge Year 1 \_\_\_\_\_

Pledge Year 2 \_\_\_\_\_

I (we) will begin pledge payments in \_\_\_\_\_ (month), \_\_\_\_\_ (year)

## Acknowledgment Information

Please use the following name(s) in all acknowledgments:

\_\_\_ I (we) wish to have our gift remain anonymous.

\_\_\_ I (we) wish to have our gift be dedicated in memory of or/in honor of \_\_\_\_\_.

Please make checks, corporate matches, or other gifts payable to:

**Revere Local Schools**

**Attn: Richard Berdine, Treasurer**

**P.O. Box 340**

**Bath, OH 44210**

