

**Aromas Community Grange #361**  
P.O. Box 562 • Aromas, CA 95004  
**Centennial Restoration Project**  
**Pledge Card**

***Donor Information***

Donor Name(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

***Pledge Information***

I (we) pledge a total of \$ \_\_\_\_\_ to be paid:

- In a single payment on \_\_\_\_\_ (date)
- In two payments, the first on \_\_\_\_\_ (date) and  
the second payment on \_\_\_\_\_ (date)

*Note: final payments must be received by June 30, 2014.*

**Tax-deductible?** If you want your gift to be tax-deductible, make your check payable to the California State Grange Foundation, a nonprofit 501(c)(3) organization. Please note on the memo line that your contribution is for the Aromas Grange Project. We will forward your check to the California State Grange Foundation, and they will provide you with a receipt for your tax-deductible donation.

If you don't need a tax deduction for your donation, make your check payable to the Aromas Community Grange or charge your donation to your credit card.

- Check
- Credit Card Number \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

If your gift will be matched by your employer or a foundation, please make sure that Aromas Community Grange receives the form to be submitted.

***Acknowledgement Information***

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

\_\_\_\_\_

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

While the fundraising campaign is in progress, may we name you as a donor? \_\_\_\_\_

May we share the amount of your gift? \_\_\_\_\_

\_\_\_\_\_  
*Signature of Donor*

\_\_\_\_\_  
*Date*