



PROMISES TO KEEP FULFILLING THE MISSION

YMCA OF SPRINGFIELD DOWNTOWN CAPITAL CAMPAIGN PLEDGE FORM

To share in the vision as set forth by the YMCA, I/We subscribe and promise to contribute an unrestricted gift as follows:

Name: _____

Company: _____
(if applicable)

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

I/we intend to contribute a total of \$ _____ over the next _____ years.

Payment to be made as follows:

Entire amount now

In payments of \$ _____

Annually Semi-Annually Quarterly Monthly

For _____ years. First Payment Date: _____

We accept matching gifts. If you are eligible, please contact your employer.

Payment Options:

Check or Cash

Bank Draft

Please add \$ _____ to my monthly bank draft beginning _____

Credit Card ___ Visa ___ MC ___ Discover

Account # _____

Exp. Date _____

Gift of stock, securities, or IRA charitable transfer

Contact: Amy Segatto Perrin, Vice President, U.S. Bank Wealth Management • 217-753-7365 or amy.perrin@usbank.com

Signed: _____

Date: _____

Mail pledge/donation to: Sue Jackson, 701 S. Fourth Street, Springfield, IL 62703

Questions about donations? Email Sue at sjackson@springfieldymca.org