



Seven Acres Foundation
PO Box 1732
103 Bighorn Way
Chelan, WA 98816

PLEDGE FORM

Pledge Amount: \$ _____ **Length of Pledge:** _____ year(s)

Payment Schedule I / We will make:

- ☐ **Monthly Payments of:** \$ _____ every month starting on _____ (date).
- ☐ **Quarterly Payments of:** \$ _____ every 3 months starting on _____ (date).
- ☐ **Annual Payments of:** \$ _____ every year starting on _____ (date).
- ☐ **A Single Payment of:** \$ _____ which will be made by _____ (date).

Payment Method:

- ☐ **Check** - Make payable to Seven Acres Foundation and send to the address listed above.
- ☐ **Online** - Make a secure online donation at chelancommunity.org
- ☐ **Stock / Securities** - Please contact Maribel Cruz to coordinate next steps.
- ☐ **Credit Card** - Make payment by Visa, MasterCard, American Express, or Discover.

Credit Card # _____ Exp. Date _____
Name on Card _____ Initials _____
Please charge: ☐ all payments to this card or ☐ only the first payment

Bank Draft / Direct Debit - direct debit payments are processed on the 10th and 20th of the month (or following business day)

Bank Routing # _____ Account # _____
Bank Name _____ Account Type: ☐ Checking ☐ Savings ☐ Other
Name on Account _____ Initials _____

Company Match (If Applicable):

- ☐ My gift is eligible for company match. Company Name: _____
My match request form: ☐ is enclosed ☐ is on the way ☐ will be submitted online
- ☐ Please consider my total expected match of \$ _____ as part of my pledge.

*Knowing the expected match amount allows us to accurately record pledges in accordance with the IRS rules and SU practices

Donor Name(s): _____

Donor Recognition Listing: _____

Special Instructions (optional): _____

Address: _____

Phone: _____ Email: _____

☐ Home ☐ Business ☐ Mobile ☐ Please send my receipt electronically, if possible.

Signature(s): _____ Date: _____