



ADVANCE

Campaign for New Generations

CONFIDENTIAL PLEDGE COMMITMENT

DONOR INFORMATION:

Name: _____

Mailing Address: _____

City, State, Zip: _____

Home #: _____ Work #: _____

Email: _____

PLEDGE AMOUNT:

I/We pledge to support the Sons of the American Revolution Foundation and the Center for Advancing America's Heritage Campaign.

I/We pledge my total gift of: \$ _____

PLEDGE PERIOD:

Pledge will be payable over (check one): 1 2 3 4 5 years

First payment will begin _____.

PAYMENT OPTIONS:

- Please bill me:
- Annually in the amount of \$ _____ in the month of _____.
- Semi-Annually in the amount of \$ _____ in months _____ and _____.
- Other: _____
- Please charge my: Visa MasterCard AMEX
Card # _____ Exp. _____
- Annually in the amount of \$ _____ in the month of _____.
- Semi-Annually in the amount of \$ _____ in the months of _____ and _____.
- Full payment is enclosed. *Please make checks payable to "Sons of the American Revolution Foundation"*
- Gift of Stock *Please contact us at 502-589-1776 for stock information and instructions.*
- My gift will be matched by my company.
- I am interested in a gift through my estate or will, please call me at () _____.

This Statement of Pledge Commitment constitutes a declaration of intent.

Signature: _____ Date: _____

Sons of the American Revolution Foundation

Center for Advancing America's Heritage: Campaign for New Generations

P. O. Box 1776 • Louisville, KY 40201-1776