



Rooted in experience. Reaching for excellence.

Pledge Form

Name(s) of Donor: _____ Date _____

Phone Number: _____

Mailing Address: _____

- I would like to make a gift of \$ _____ and my payment is enclosed (see payment section below).
- I would like to make a pledge of \$ _____ and I would like to pay this on _____ (date).
- I would like to make a pledge of \$ _____ to be paid in \$ _____ installments quarterly/monthly (circle one), starting on _____ (date) until pledge is filled.
- I would like to pledge \$ _____ and pay with a gift of securities, please call Jen Levy at 435-787-8209.

Note: ANCA staff will send reminders prior to pledge payment date(s).

Fund: ___ Annual ___ Memorial Scholarship ___ Endowment ___ Planned Giving

Payment Amount: \$ _____ Payment Method: _____ Check Payable to ANCA

Credit Card: ___ Visa ___ MasterCard ___ American Express

Credit Card # _____ Expiration Date _____ Card Security Code _____

Name on Card _____ Billing Zip Code _____

My gift is in memory of: _____

My gift is in honor of: _____

Please send acknowledgement to: _____

_____ **My gift is eligible for a matching gift. Please contact me.**

Mail Form to: Jen Levy • ANCA • P.O. Box 464 • Logan, UT • 84323
Questions: 435.787.8209