

ORGANIZATIONAL PLEDGE COMMITMENT

DONOR INFORMATION

ORGANIZATIONAL NAME			ORGANIZATIONAL CONTACT NAME	
ADDRESS			TITLE/POSITION	
CITY	STATE	ZIP	PHONE	EMAIL

PLEDGE INFORMATION (NOT TO EXCEED 5 YEARS)

Total Amount \$ _____ Fund name or purpose _____ Ended? Yes No

I/we would like to make pledge payments Annually Quarterly Monthly
 in the amount of: \$ _____ for a period of _____ Years Months
 beginning: _____ (mm/yy) *Recurring credit card pledges will begin automatically

Installment amount (if different than included payment): \$ _____ *
**Must be equal amounts for each installment*
 Send pledge reminders to the address above: Yes No
**Reminders will not be sent if recurring credit card option is selected below*

I/we would like to make my first pledge payment totaling \$ _____ now

PAYMENT INFORMATION

Enclosed is my/our check, made payable to the University of Washington Foundation
 Stock transfer (Contact Yelena Isakova in the UW Treasury Office for instructions: yisakova@uw.edu)
 Please bill my credit card for the first installment of \$ _____
 Please charge my credit card for all my pledge payments. I understand that my credit card will be automatically charged in each billing cycle. Recurring payment amount: \$ _____

<input type="checkbox"/> VISA	CARD NUMBER	EXP DATE (mm/yy)
<input type="checkbox"/> Mastercard	FULL NAME ON CREDIT CARD	
<input type="checkbox"/> American Express	SIGNATURE (required to validate payment)	
<input type="checkbox"/> Discover		

RECOGNITION PREFERENCES

I/we request use of this name for all recognition materials: _____
 I/we request to remain anonymous in all printed and online materials

I/we intend to fulfill this pledge by _____ (date) of our _____ year pledge, but reserve the right to accelerate or defer payments in any given year due to personal circumstances.

Donor	Donor	Date
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Your gift is tax deductible as specified in IRS regulations. Pursuant to RCW 19.09, the University of Washington is registered as a charitable organization with the Secretary of State, state of Washington. For information call the Office of the Secretary of State, 1-800-332-4483.

Gift Services Use Only	Donor ID: _____	Spouse ID: _____
	Staff Name: _____	Allocation/Budget: _____