

campaign pledge form

Donor Name	
Donor Address	
Email	
Primary Phone Number	Cell Phone Number
INVESTMENT DESIGNATION	
One Time Capital Campaign I	nvestment Towards the Outdoor Program Vision
Please accept my/our total ple	dge in support of the mission of Girl Scouts of: \$
☐ Monthly Payments ☐	s towards this gift over the next 1 2 3 4 5 year(s) (circle one above) based on this schedule: 2 Semi Annual Payments
' '	ent reminders will be mailed to me/us based on the schedule above (month) of(year)
☐ I/We understand that paym	ent reminders will be mailed to me/us based on the schedule above.
I/We would like the gift to be di	rected to:
☐ Shelly Ridge ☐	I Mosey Wood □ Laughing Waters □ General
RECOGNITION	
☐ Yes, I authorize the Girl Scouts (e.g. Annual Reports, campaign p	of Eastern Pennsylvania (GSEP) to recognize the face or market value in publications. ublications)
Please print your name(s) as you	would like to be recognized in GSEP publications:
☐ I prefer to contribute anonyme	ously.
the pledge which is not paid durin	of orceable at law and legally binding on my estate and the executors and administrators thereof. Any portion of any my lifetime, or at my death pursuant to a beneficiary designation or from a revocable trust created by me, shall be be time of my death from my estate.
Signed:	Date:

A copy of the official registration and financial information may be obtained from the Pennsylvania Department of State by calling toll-free, within PA, 1-800-732-9000. Registration does not imply endorsement.

Please return form to:

Girl Scouts of Eastern Pennsylvania Attn: Trish Corvo Senior Manager, Prospect Research and Campaign Reporting 330 Manor Road Miquon, PA 19444

For more information contact:

Trish Corvo tcorvo@gsep.org 215.564.2030, ext. 1084



