

Pledge Form

Donor(s) Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____

Email: _____

**Gifts to the campaign are 100% tax deductible.
CCSD Foundation is a 501(c) organization.**

- Yes, I would like to **PAVE THE WAY** for community health!
___ (#) Large Pavers \$1,000 (\$333/year for three years)
___ (#) Small Pavers \$300 (\$100/year for three years)

- I do not wish to order a specific dedication or paver, but will make a pledge of \$_____ to support the project.

I would like to spread my pledge payments over _____
(1,2 or 3 yrs)

- Enclosed is a check to the Central Columbia Educational Foundation.
- I prefer to make a contribution in the form of:
 Cash/Check Stock Credit Card

Credit Card #: _____ Exp: _____

- My gift will be matched by _____

Please print name as you would like to appear in formal recognition:

Please print your message as you would like it to appear on paver:

4x8 pavers: 3 lines, 13 characters per line
12x12 pavers: 5 lines, 17 characters per line

The Foundation reserves the right to request edits to unacceptable content