

pledge form

Capital Campaign Pledge Form

name

address

city, state, zip

phone day/eve

name as you would like it to appear for recognition
(please indicate if you would like the donation to be "Anonymous")

I would like to do my part by pledging _____ to the Kirksville Arts Association for their Capital Campaign.

I've enclosed my first payment of \$ _____

Please bill me \$ _____ monthly

Please bill me \$ _____ quarterly

Please bill me \$ _____ semi-annually

Please bill me \$ _____ annually

Contact me as I would like to make other payment arrangements (gifts of stocks...)

I work for a company that has a matching gift program. Please contact me for more information.

Please mail your pledge form back to our office at P.O. Box 88, Kirksville, Missouri 63501. Donations to the Kirksville Arts Association are tax deductible. The Kirksville Arts Association is a not-for-profit registered 501(c)3 organization. Contact us at 660.665.0500 or kvarts@kvmo.net with any questions.