

VETERANS MEMORIAL & SUPPORT FOUNDATION THE LIBERTY CAMPAIGN: UNITED WE STAND PLEDGE / GIFT DONATION FORM

Veterans Memorial & Support Foundation 481 N. Santa Cruz Ave., Suite 250 Los Gatos, CA 95030

Re: My/Our intent to make a tax-deductible gift to the Veterans Memorial & Support Foundation's Liberty Campaign

Dear General Hillhouse and Foundation Board:

| ΡI | FD | GE | /CI | FT |
|----|----|-----|------|------|
| ГL | шD | UL. | / UI | н. т |

| in-kind | I/we are delighted to contribute to the Veterans Memorial & Support Foundation of Los Gatos in cash and/or securities and/or donations a total of \$ payable as follows: | | | | | | | |
|---------|--|--|--|--|--|--|--|--|
| | By date as a one-time gift. | | | | | | | |
| | \$ monthly/quarterly [please circle applicable term] in cash for months/quarters [please circle term]. Over the next [1,2, or 3] year(s). I/We intend that payment will be made as follows: | | | | | | | |
| | AMOUNT TO BE PAID DATE(S) BY WHICH PAYMENT(S) WILL BE MADE: | | | | | | | |
| | If this is an annual contribution, please send me/us a statement thirty (30) days in advance of each due date. | | | | | | | |
| PREFE | RRED CHOICE OF PAYMENT | | | | | | | |
| | Enclosed Check (#) payable to the Veterans Memorial & Support Foundation of Los Gatos. | | | | | | | |
| | Credit Card: | | | | | | | |
| | Electronic Bill Pay in the amount of \$ payable one-time/monthly/quarterly/annually (please circle applicable term) from Acct. # Financial Institution: | | | | | | | |
| | Securities (See forms enclosed.) | | | | | | | |
| | IRA Charitable Rollover (See forms enclosed.) | | | | | | | |
| | Donor Advised Fund: Fund Name | | | | | | | |
| | Wire Transfer of \$from Acct. #, Acct. Title: Financial Institution Name/Address: | | | | | | | |
| | Corporate Matching Gift: My gift enclosed is \$ I am applying for a match = \$ through my employer (or former employer) Company Name & Address: | | | | | | | |





GIFT DIRECTIVE

| | This Gift is intended to Join a Circle upon the Wall of Gratitude Program for gifts =/> \$10,000. | | | | | | | | | | |
|--------|---|--|---------------------------|--------------------------|----------------------------|--------------|--|--|--|--|--|
| | <u>M</u> | ajor Donor Circles & Dona | tion Levels | | | | | | | | |
| | ☐ Loyalty: \$ 10,000+ ☐ Justice: \$ 25,000+ ☐ Honor: \$ 50,000+ | □ Valor: □ Independence: | \$ 75,000+ \$ 100,000+ | ☐ Freedom: ☐ Liberty: | \$ 250,000+ \$ 500,000+ | | | | | | |
| | ☐ The following is the mann Veterans Memorial & Support (Please type or print) | Foundation: | | | | ition by the | | | | | |
| | ☐ Or please do not list my na | ame as I/we which to rem | ain anonymous. | | | | | | | | |
| | A contribution to the Paver Pro Please enclose one form per pa | | e paver(s) as identifi | ed on the enclosed "Pav | ver Contribution | Form(s)". | | | | | |
| | A Memorial Gift: "In Memory o | f: | | | | | | | | | |
| | ☐ Please send an acknowledg | ement of this gift to: (Part | y name) | | | | | | | | |
| | Street Address | | | City | State | Zip | | | | | |
| | An Honorary Gift: "In Honor of | An Honorary Gift: "In Honor of:" | | | | | | | | | |
| | ☐ Please send an acknowledg | ☐ Please send an acknowledgement of this gift to: (Party name) | | | | | | | | | |
| | Street Address | | | City | State | Zip | | | | | |
| | Not directed towards any of the support of its mission. | e above. This gift is a cont | ribution to the Veter | rans Memorial & Suppo | rt Foundation in | | | | | | |
| | will make every effort to honor the nstances. | e scope and timing of this | commitment but reso | erve the right to modify | it in the event of | unforeseer | | | | | |
| Signat | ure: | | Date | e: | | | | | | | |
| Name | (s) (Please Type or Print): | | | | | | | | | | |
| Mailin | g Address Line 1: | | | | | | | | | | |
| | g Address Line 2: | | | | | | | | | | |
| | tate: | | | | | | | | | | |
| | Addragg | | | Phono | | | | | | | |