PLEDGE FORM

WASHINGTON STATE UNIVERSITY
FOUNDATION

Your gift inspires possibilities.
Washington State University thanks you for your generosity.

WSU FOUN 11/2021

ID NUMBER(S)

NAME(S)

ORGANIZATION

ADDRESS

CITY STATE ZIP COUNTRY

EMAIL

PLEDGE INFORMATION

WE WISH TO PLEDGE $ _____ TO SUPPORT THE FOLLOWING FUND(S), PROJECT(S), OR AREA(S):

WSU MASTER GARDENER PROGRAM ENDOWED FUND Gift ID # GF007065

THIS GIFT IS IN THE FORM OF:

☐ Cash ☐ Securities ☐ Trust/Annuity ☐ Real Estate ☐ Bankcard ☐ Other: _____

PLEASE NOTE: The pledge amount should not include **MATCHING GIFTS** or gifts made through a **DONOR-ADVISED FUND**.

PAYMENT INFORMATION

1. Single payment on (date) ____ /____ /____
2. Multiple payments of $ _____

   Beginning (date) ____ /____ /____

   ☐ Monthly ☐ Quarterly

   ☐ Semi-annually ☐ Annually
3. Other preferred payment arrangements

   _____

Please do not enter your credit card information on this form. If you would like to make a payment by credit card, or set up a recurring online pledge payment, please visit **foundation.wsu.edu/give**

This commitment will be matched by (company name)

_____

RECOGNITION PREFERENCES

☐ I (we) request the use of this name for all recognition materials:

_____

☐ I (we) request to remain anonymous in all printed/online recognition materials.

_____ ____ /____ /____
SIGNATURE DATE

_____ ____ /____ /____
SIGNATURE DATE

For a disclosure of WSU Foundation fees, visit **foundation.wsu.edu/fees**

PLEASE RETURN THIS FORM TO:
WSU Foundation | ATTN: Gift Accounting | PO Box 641927, Pullman, WA 99164-1927