

SALISBURY

HOUSE  GARDENS

LETTER OF GIFT COMMITMENT

Name(s) _____

Address _____

City, State, Zip _____

Telephone (cell) _____ Email _____

Yes, I/we wish to join you in making a commitment in keeping Salisbury House & Gardens, and its compelling community programs, alive for the next generation of Iowans. I/We pledge the following gifts.

GIFT DESIGNATION

- Annual Fund (unrestricted)
- Capital Projects (e.g. systems replacement, cottage and courtyard renovations, south terrace improvement, gardens enrichments)
- Fine Art Restoration (e.g. paintings, tapestries, furniture and other antiques)

GIFT RECOGNITION

All supporters who commit to making a gift to Salisbury House & Gardens are offered the opportunity to be recognized.

- I/We wish to remain anonymous in any/all donor recognitions.
- I/We wish to be recognized in any/all donor recognitions.

GIFT FULFILLMENT

I/We would like to pledge \$ _____

- A one-time payment Multiple payments

- Please charge the following credit card:

- Visa Mastercard Discover American Express

Name as it appears on card _____

Card Number _____

Expiration Date ____/____/____ CVV _____

- Please charge subsequent pledge or recurring payments to this card.

- I/We will mail a check/s (Make payable to Salisbury House & Gardens.)

- This gift will be matched by one or more employers.

Employer(s): _____

- Please contact me/us with information about completing my/our pledge through automatic bank withdrawal.

Donor Signature(s) _____ Date _____

Beth Laing, Office Manager _____ Date _____

Multiple Payments Pledge

Please use the following space to map out your pledge as applicable.

Payments of \$ _____

- Monthly
- Quarterly
- Semi-annually
- Annually

Start date: ____/____/____

Calendar Year (Jan. – Dec.)

20__ - 20__ \$ _____

20__ - 20__ \$ _____

20__ - 20__ \$ _____

20__ - 20__ \$ _____

20__ - 20__ \$ _____