



Campaign for a New Beginning

Gift Commitment Form



YES, I/we pledge a gift of \$ _____ to the New Beginnings Building Campaign.

Name(s): _____

Phone: _____ (work) _____ (home / cell)

Address: _____

Email: _____ *Mail preference:*
 No preference Paper Email

Recognition:

I/we would like to reserve _____ (Room) for naming; please contact me/us to confirm availability.

Yes, you may use my/our name in publications acknowledging campaign supporters and donors
*If different from above, please clearly print Name(s) **exactly** as it should appear for recognition purposes:*

OR

I/we wish for this gift to remain anonymous; please do not use my/our name in any publications or displays.

Pledge schedule:

\$ _____ is enclosed, payable to New Beginnings.

I/we wish to pay the balance of my/our pledge as follows:

Annually over the next ____ year(s), with one (1) payment of \$ _____ per year, to begin in _____ (month) of _____ (year).

Quarterly over the next ____ year(s), with four (4) payments of \$ _____ per year, to begin in March, June, September, December (circle) of _____ (year).

Monthly ____ (number) payments over the next ____ year(s) of \$ _____ per month, to begin March, June, September, December (circle) of _____ (year).

I will send the above payments via check

OR

Please charge the above payments to MasterCard Visa Discover

****NOTE:** Name, Address, Phone, Email, Expiry, and Signature are **required** for credit card processing**

_____/_____
 Credit Card Number Exp. Date Name on Card – Please print clearly

Signed: _____ **Date** _____

Thank You for your Support!

New Beginnings, Inc. ♦ 436 Main Street, Lewiston, ME 04240 ♦ 207-795-4077 ♦ www.newbeginmaine.org

New Beginnings is a 501(c)(3) nonprofit and your donation is tax deductible to the extent provided by law.

NB ADMIN USE ONLY:

Date Entered _____ Entered by _____ DS Number _____ Date Ackn'd _____