

Gift/Pledge Agreement

In recognition of the need and in consideration of the gifts of others, I/we agree to pay the Hoover Presidential Foundation to support the Hoover Museum Renovation Project Fund the total sum of \$______to be paid in cash, securities, or other property of equivalent value. Name Please print your name(s) as you would like to be recognized. ☐ This gift is anonymous. *Donors checking this box will not be listed by name in giving publications.* **Address** City, State, Zip **Phone** Email **Gift or Pledge** The total amount shown above is: an outright gift □ a pledge OR You can give online at: Timeless Values Campaign.org **Pledge Payment** Pledge to be paid over a _____ year period. Balance to be paid as follows: **Schedule** Total pledge Year <u>Amount</u> Paid herewith (-) 2021 Balance due 2022 2023 2024

I would like to pay special tribute to the person below: ☐ in honor of

Name (please print)

Honor or

Memorial

☐ in memory of

Please make your check payable to: Hoover Presidential Foundation		I want to make my gift or initial pledge payment using my credit card:				
		☐ Visa	☐ MasterCard	☐ Discover	☐ American Express	S
		Expiration Date Security Code				
Name as it appears or credit car	n	Please print you	ır name as it is listed o	on your credit card.		
Signature		Date				
How can we help?	0		gift in my will to	the Hoover President	ential Foundation.	
Matching Gifts		You may be able to leverage your contribution through a matching gift program at your or your spouse's employer. Please ask your human resources office for the appropriate form. Once completed, return it with this form.				
Please ret	urn					
this form to:		Hoover Presidential Foundation				
		P.O. Box 696				
		West Branch,	IA 52358			
		(319) 643-5327				

Thank you! Your support makes an impact!