



# DONATION & PLEDGE FORM

Associated Ministries • 1224 South I Street • Tacoma, WA 98405 • 253-383-3056

*Associated Ministries is a 501(c)3 organization, tax ID 91-0847534*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## I would like to support Associated Ministries with a single tax-deductible gift:

\$25       \$50       \$100       \$250       \$500      Other \_\_\_\_\_

## I would like to make a tax-deductible gift pledged in multiple installments:

I will pay \_\_\_\_\_ amount      monthly / every other month / quarterly **(circle one)**  
for \_\_\_\_\_ years beginning on the following date \_\_\_\_\_ .

I authorize you to charge my credit card for these payments.

## I would like my gift to benefit:

Where it's most needed       The program of my choice: \_\_\_\_\_

## Honorariums & Memorials:

My gift is  In Memorial       In Honor of

Name of honoree/designee: \_\_\_\_\_

Please send an acknowledgement to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Payment information:

I am enclosing a check or money order made payable to **Associated Ministries**.

Please charge my VISA / Mastercard **(circle one)**:

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

I want to pay with stocks, bonds, or mutual funds. Please contact me to arrange a transfer.

To maximize my gift I have enclosed a matching gift form from my employer.

Send me more information about **(circle)**:

programs

volunteer opportunities

having someone from AM speak to my group

Mail this form to: **Associated Ministries, 1224 South I Street, Tacoma, WA 98405**