



A Heart for Mothers...A Home for Mothers

Statement of Intent

Contact Information:

Donor Name(s): _____

Primary Contact Person: _____

Street Address: _____

City, State, ZIP: _____

Primary Phone: _____ Landline Mobile Can be texted

Email Address: _____

Pledge Information:

To the glory of God, I/we pledge a total of \$_____ to the *Heart* campaign. The wish is for the gift to be allocated as follows:

- 100% towards highest priority need(s) of the campaign
- _____% towards _____
- _____% towards _____
- _____% towards _____
- _____% towards _____

Recognition Information:

All donors to the *Heart* capital campaign will be acknowledged and recognized for their gift. For tax purposes, donors will receive a formal end-of-year statement that complies with IRS standards for tax-deductible purposes.

Recognition is provided in various ways through plaques and/or printing in an organization publication for the purpose of:

- Honoring or memorializing someone.
- Providing an example of generosity for others to emulate.

For those who wish anonymity, the recognition will simply indicate the donor to be listed as ANONYMOUS.

- I/We wish this gift to be ANONYMOUS. It is understood that the donor(s) of this gift will not be listed in any periodical, plaque, or other means of recognition, except for the annual confidential statement of giving provided for tax purposes.

Continue to other side for additional recognition & payment information...

Recognition Information continued...

Donor(s) to be recognized: _____

When provided as an acknowledgment of someone:

Gift made in memory of: _____

Birth Year: _____ Death Year: _____

Gift made in honor of: _____

Occasion: _____

For any further explanation attach a separate page

Payment Method Information:

The gift will be provided as follows:

Lump-sum – to be paid on or about: _____ (Date)

Method for Lump-sum payment:

Check (Payable to New Beginnings*)

Credit Card: Visa MasterCard Discover American Express

Card Number: _____ Exp. Date: _____

Name on Card: _____

Other (e.g. stock, securities, etc.) _____

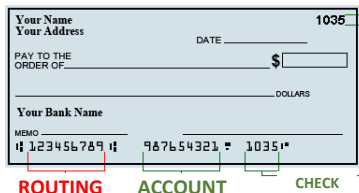
Installments: Frequency: Monthly Quarterly Semi-annually Annually

Span: 1 Year 2 Years 3 Years 4 Years 5 Years

Method for Installment Payments:

Check (Payable to New Beginnings*)

Electronic Fund Transfer (EFT): Bank Name: _____



Bank "Routing Number": _____

From Checking Account – or – From Savings Account

Checking/Savings "Account Number": _____

Credit Card: Visa MasterCard Discover Am. Express

Card Number: _____ Exp. Date: _____

*Any check to New Beginnings is restricted for the construction/furnishing of a new building for New Beginnings unless otherwise indicated.

Estate Plan:

Please contact me about making a gift to New Beginnings in my estate plan

Call: _____ Email: _____

Your signature indicates that you understand your contribution to the *Heart for Mothers...Home for Mothers* campaign will be used to construct/furnish a new building for single mothers and their children. New Beginnings - A Home for Mothers is an IRS 501(c)3 nonprofit organization. Contributions are tax deductible to the extent allowed by law. Your signature also provides permission for EFT or credit card transactions as authorized above.

Signature of donor(s)

Date Signed

Printed name(s) of signer(s)