 **AFP Foundation for Philanthropy**

**Growth in Giving Initiative Gift/Pledge Form**

Name AFP ID

Title

Organization

Address

City State ZIP

Business Phone Cell Phone \_\_\_\_\_\_\_

Home Phone E-mail

Chapter Name \_\_\_\_\_\_\_\_\_\_\_\_

**Yes, I will support the Growth in Giving Initiative with a**

Gift of $ \_\_\_\_\_\_\_\_\_ or  Pledge of $ \_\_\_\_\_\_\_\_

*Please choose one of the following fulfillment options:*

One-Time Gift  Specific Pledge Payment Schedule:

**Payment 1** $ Date **Payment 3** $ Date \_\_\_\_\_

**Payment 2** $ Date **Payment 4** $ Date \_\_\_\_\_

Please send me reminders for my pledge during the months circled below.

January February March April May June July August September October November December

**Payment Method *(make a gift or pledge online at www.afpfoundation.org)***

Through my check made payable to **AFP Foundation for Philanthropy**

Through my credit card (VISA, MasterCard, Discover, or American Express)

Card number Expiration Date \_\_\_\_\_/\_\_\_\_\_

Return completed pledge form to **AFP Foundation for Philanthropy, 4300 Wilson Boulevard, Suite 300, Arlington, VA 22203-4168**; scan and email it to **foundation@afpnet.org**; or fax it to **703-683-0735**. Please contact us at **800-666-3863** with any questions.

Thank you for supporting AFP Foundation for Philanthropy. Gifts to the Foundation are tax-deductible to the fullest extent of the law as no goods or services are provided in consideration of a gift (Tax ID #52-1241128). Under the direction of the Board of Directors, the AFP Foundation retains complete control over the use and distribution of donated funds in furtherance of its mission.