

**Pledge Gift Agreement**

In support of the Springfield Museum of Art Comprehensive Campaign, I/we pledge to provide the contribution described below to the Art invites... Comprehensive Campaign:

Total Gift/Pledge Amount \_\_\_\_\_

With the Balance to be Paid:  Monthly  Quarterly  Semiannually  Annually

Total Number of Installments \_\_\_\_\_ Each in the Amount of \_\_\_\_\_

First Payment Date \_\_\_\_\_ Final Payment Date \_\_\_\_\_

My/Our Gift Will Be Paid Via:  Credit Card  Check  Stock Other \_\_\_\_\_

For Credit Card Payment:  Visa  Mastercard  Discover  American Express

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_ Name as it appears on card \_\_\_\_\_

Billing Address \_\_\_\_\_

I would like to cover the cost of the credit card transaction fee of 3% per transaction each time a pledge payment is applied to my credit card:

Please schedule my credit card pledge payments on the \_\_\_\_\_ day of each month.

(Payment reminders will not be sent for monthly automatic credit card pledge payments.)

Please contact me regarding matching opportunities from my employer

Special Gift Instructions \_\_\_\_\_

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

Name(s) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Should my death or disability prevent me from fulfilling this gift, I request that my executor or attorney make a reasonable effort to complete the gift in a timely fashion.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

The Springfield Museum of Art accepts this pledge agreement. Contributions are tax-deductible to the extent provided by law. Checks should be made payable to "Springfield Museum of Art Comprehensive Campaign."

Signature \_\_\_\_\_ Date \_\_\_\_\_