

HOME OF THE BRAVES

2023 PLEDGE FORM



INDIAN HILL
FOUNDATION

DONOR INFORMATION

Donor Name(s) _____

Billing Address _____

City, State, Zip _____

Phone | Email _____

PLEDGE INFORMATION

I (we) pledge a total of: \$ _____

Payment Terms: Pay in full Payable over multiple years* (check one): 2 3

**Gifts payable over multiple years must be a minimum \$5,000 and complete by December 31, 2025*

For multi-year gifts, please provide your first payment date: _____

Please send me (us) a payment reminder each year of our pledge in (month): _____

I (we) plan to make this contribution by: Check Credit Card Stock* Other: _____

**For gifts of stock and wire transfers, please contact Lori Klinedinst at (513) 272-5932 or lori.klinedinst@indianhillschools.org Heirs and Assigns: This Agreement shall inure to the benefit of and be binding upon both parties, and their respective heirs, personal representatives, successors and assigns.*

For credit card contributions, please provide the following:

Name on Card: _____ Card Type: _____

Credit Card Number: _____ Exp. Date | CVV: _____

Authorized Signature: _____

My gift will be matched by (company/foundation): _____

form enclosed form will be forwarded via mail or email

ACKNOWLEDGMENT INFORMATION

Please publicly acknowledge this gift. *Print name(s) below as you wish to appear in donor recognition materials.*

Please **do not** recognize this gift publicly. I (we) wish for the gift to remain anonymous.

This gift is (circle one) in honor of / in memory of: _____

Signature _____ **Date** _____

Please make gifts payable to: Indian Hill Foundation

Mail form to: Indian Hill Foundation 6855 Drake Road, Cincinnati, OH 45243

All gifts are tax deductible as allowed by law Tax ID Number: 31-1813923