



The Encompass Capital Campaign: Pledge Card

Thank you so much! We are thrilled that you have decided to embark on this journey with us.

Please fill out, sign, and return as your pledge or with your contribution to the campaign, either by email to or mail to:

SeniorsPlus Capital Campaign

8 Falcon Road

Lewiston, ME 04240

marketing@seniorsplus.org

1-800-427-1241

CAMPAIGN DONATION AGREEMENT

This Charitable Donation Agreement is made and entered into as of _____ (date) by and between _____ (name) and SeniorsPlus, a charitable donation as described herein:

PLEDGE TOTAL: \$ _____

I plan to fulfill my pledge with:

One-time payment

Multi-Year payment (gift will be spread over _____ years)

I will complete my payments by: _____ **(final date)**

I plan to give through:

Personal Check

Donor-Advised Fund

Online/Credit Card

Family Foundation/Foundation

Stock Transfer

Corporation/Business

For tax purposes, you can use our tax-deductible number (01-0317103).



The purpose of this Agreement is to set forth the terms and conditions pursuant to which the funder/donor shall provide and SeniorsPlus shall receive the Contribution.

SeniorsPlus is seeking support for a capital campaign. The funder/donor desires to support the SeniorsPlus through its Contribution.

The parties have signed and thereby caused this Agreement to be effective from the date written above.

DONOR INFORMATION

Name: _____ **Title:** _____

Email: _____ **Phone:** _____

Address: _____

Signature: _____ **Date** _____

SENIORSPLUS

Name: _____ **Title:** _____

Signature: _____ **Date:** _____

Thank you again for joining our Campaign! We look forward to our partnership and sharing updates as we move closer to opening the new SeniorsPlus building.

___ Please check if you do not want to be listed as a donor on our website.