



## Pledge Form: Los AI Leadership Circle

The distinguished, significant supporters of the Los Alamitos Education Foundation's visionary work

### Donor Information

Name *(Please print)*

Mailing address

City

State

Zip code

Tel (H)

Tel (C)

Email

### Gift Information (\$1000 minimum annually with levels of \$2500, \$5000, \$10,000 and \$25,000+)

It is my/our intention to contribute to LAEF and join the Los AI Leadership Circle for a total of \$ \_\_\_\_\_ payable over the next \_\_\_\_\_ years.

### Payment Schedule

My/our intent is to divide this gift into  annual  semi-annual  quarterly  monthly payments as follows.

Payments will be made by

Amount to be paid

Date

\$

Date

\$

Date

\$

Date

\$

Date

\$

A statement will be sent 30 days in advance of each due date.

My gift may be matched by my company.

### Payment Information

My/Our initial payment of \$ \_\_\_\_\_ is enclosed, payable to LAEF.

I will set up monthly credit card donations at [www.LAEF4Kids.org/donate](http://www.LAEF4Kids.org/donate) - click on the "Donate" button, then check the box to "Make this a monthly donation".

I will make my annual membership donation by credit card at [www.LAEF4Kids.org/donate](http://www.LAEF4Kids.org/donate)

### Recognition

I would like my name to appear on any official/public recognition as follows:

Name(s)

List my/our gift

In Honor of

In Memory of

Please do not list my/our name as I/we wish to remain anonymous.

*This gift is unrestricted to LAEF and will be used to fulfill its mission. The donor(s) will make every effort to honor the scope and timing of this commitment, but reserves the right to modify it in the event of unforeseen circumstances.*

Authorizing Signature

Date

Questions? Contact Executive Director Carrie Logue at [clogue@LAEF4Kids.org](mailto:clogue@LAEF4Kids.org) or 562.799.4700 Ext. 80424

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[www.LAEF4Kids.org](http://www.LAEF4Kids.org)

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