



CAMPAIGN PLEDGE FORM

Thank you for your consideration of the Saginaw Community Food Club & Kitchen! Through this project we hope to make Saginaw County an even better place to live, work, and thrive.

Contributing to this project makes you an advocate for the food security of individuals and families in the Saginaw community and beyond. Your pledge demonstrates your commitment to a healthier and more economically secure community.

My (our) commitment will be:

_____ One-time financial pledge of \$ _____
 _____ Monthly financial pledge of \$ _____ on the _____ of each month
 _____ Quarterly financial pledge of \$ _____ starting on _____ / _____ / _____
 _____ Annual financial pledge of \$ _____ for _____ consecutive years

Donor Information:

Name/Organization: _____
 Name(s) by which you wish your gift to be recognized

Address: _____
 Street City State ZIP

Preferred Phone: _____

Preferred Email: _____

_____ Check to make donation anonymous

Payment Information:

Method of payment: Cash _____ Credit Card: _____ Visa _____ MasterCard _____
 *Check _____ Discover _____ American Express _____

Cardholder Name: _____

Card Number: _____ CVV: _____ Expiration: _____

Cardholder Signature: _____ Date: _____

Please provide any invoice requirements: _____

**Please make checks out to the Saginaw Community Foundation, with "Saginaw Food Club" in the memo.*

The Saginaw Community Foundation is a 501(c)3 organization. Donations are tax-deductible. Please send your donation with this completed form to 1 Tuscola St, STE 100B, Saginaw, MI 48607, or make your donation online at [Saginaw Community Foundation](#) (Under Fund, select "Community Food Club"), or contact the office at (989) 755-0545.