

# ENDOWMENT FUND DONOR COMMITMENT FORM



## DONOR INFORMATION

Donor Recognition Name: \_\_\_\_\_  
*(as you want it to appear on all donor recognition)*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

## DONATION INFORMATION

I would like to contribute \$ \_\_\_\_\_ to The Junior League of Tampa's Endowment Fund.

You may donate ONLINE @ [www.jltampa.org](http://www.jltampa.org) -OR- Please select a payment option below and return this form to:  
The Junior League of Tampa, 87 Columbia Dr., Tampa, FL 33606, Attn: JLT Endowment Fund

My CHECK is enclosed for full payment: Check #: \_\_\_\_\_ *(Payable to The Junior League of Tampa)*

I would like to pay a portion (\$ \_\_\_\_\_) of my pledge today and make annual payments of \$ \_\_\_\_\_ over \_\_\_\_\_ years (1-3 year payment plans available).

Please send me an invoice for the full amount.

I wish to make a gift of stock. Please ask a League representative to contact me.

I wish to make a gift through my estate. Please ask a League representative to contact me.

## RECOGNITION INFORMATION

My gift is designated in honor or memory of someone special. *(As you would like it to appear in publications.)*

In honor of \_\_\_\_\_

In memory of \_\_\_\_\_

Other \_\_\_\_\_

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

The Junior League of Tampa, Inc Registration #CH12009. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING 1-800-HELP-FLA (435-7352) TOLL-FREE WITHIN THE STATE, OR VISITING THEIR WEBSITE AT [WWW.FLORIDACONSUMERHELP.COM](http://WWW.FLORIDACONSUMERHELP.COM). REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

*Thank you for your support!*