(Multi-Year) Pledge Form

Donor Information:

Title: ___________  First Name: ___________________________  Last Name: _______________________
Address: ___________________________________________  Address 2: ___________________________
City: _____________________  State/Province: _________  Postal/Zip: ____________________________
Country: ___________________  Phone: _________________  Email: ________________________________

If you indicate that the donor is a foundation or corporation, please note that you:

● Must be an authorized representative of the foundation or corporation,  
  and
● Must sign in your capacity as the foundation or corporation representative (not as an individual) below  
  by providing your title.

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<tr>
<th>Year</th>
<th>Amount of Gift</th>
<th>Payment Date</th>
<th>Company Match</th>
<th>Total Gift</th>
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Single Giving Source:

☐ Individual: Please see names provided above

☐ Foundation: ___________________________

☐ Corporation: ________________________

I/We are pleased to support Women of the World Endowment by making or facilitating the above commitment:

Signature: _______________________________  Date: ______________
Signature: _______________________________  Date: ______________

Women of the World Endowment is a 501(c)3 charitable organization and gifts made to it are tax deductible to the extent allowed by the law.