



SOUTH CAROLINA
URBAN ENTOMOLOGY
CHARITABLE ALLIANCE
— In Cooperation with SCPCA —

DONOR PLEDGE FORM

DONOR CONTACT INFORMATION

Company Name: _____

Primary Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

PRIMARY CONTACT INFORMATION

Office Phone: _____ Mobile Phone: _____

Email: _____

SECONDARY CONTACT INFORMATION

Secondary Contact Name: _____

Office Phone: _____ Mobile Phone: _____

Email: _____

DONOR OPPORTUNITY LEVELS

Contributions may be made as a one-time gift or a pledge over 5-10 years. First payment is due by 12.15.19

*The Clemson University Stewardship Program will be determined by donor participation.

- | | |
|--|--|
| <input type="checkbox"/> Program Champion - \$5,000,000 | <input type="checkbox"/> Advocate \$100,000+ (Amt Pledged: \$_____) |
| <input type="checkbox"/> Zungoli Society \$2,500,000+ (Amt Pledged: \$_____) | <input type="checkbox"/> Leader \$50,000+ (Amt Pledged: \$_____) |
| <input type="checkbox"/> Benson Society \$1,000,000+ (Amt Pledged: \$_____) | <input type="checkbox"/> Patron \$10,000- \$25,000+ (Amt Pledged: \$_____) |
| <input type="checkbox"/> Champion \$500,000+ (Amt Pledged: \$_____) | <input type="checkbox"/> Friend \$1,000- \$9,999 (Amt Pledged: \$_____) |
| <input type="checkbox"/> Guardian \$250,000+ (Amt Pledged: \$_____) | |

DONATION TYPE ☐ One-Time Gift ☐ Pledge over 5 Years

*Ten year pledges can be accepted, please note request and Lisa will be in touch to confirm details.

Notes: _____

☐ We give our approval to include this donation in publicity.

SIGNATURE _____ **DATE** _____

SUBMIT

Click Submit button to email Completed Donor Pledge Form.

(Or, save completed form as a PDF and email to lisa@fusionflorida.com as an attachment.)