



## DreamHouse CILA Capital Campaign

### Pledge/Gift Commitment Form for Cash Donations

#### PERSONAL INFORMATION

Name of Donor(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

*Please note that it is our practice to list donor names and gift ranges in appropriate publications. DreamHouse CILA Capital Campaign gifts of \$1,000 and above will also be featured on a donor wall in the home.*

Name(s) as you wish to be listed, if different than above \_\_\_\_\_

\_\_\_\_ I wish to remain anonymous (check box)

#### GIFT/PLEDGE INFORMATION

I/We wish to make a: \_\_\_\_ One time gift \_\_\_\_ Pledge of \$ \_\_\_\_\_

As follows: Cash \$ \_\_\_\_\_ Stock, Bonds, Mutual Funds valued at \$ \_\_\_\_\_

I/We would like for this gift to be: \_\_\_\_ Unrestricted to the DreamHouse CILA Capital Campaign

\_\_\_\_ Restricted (Naming Opportunities as outlined in solicitation)

**PLEDGE PAYMENT OPTIONS:** *Contributions may be spread over 1 - 2 years. Please indicate choice: I/*

We will give \$ \_\_\_\_\_ a year for \_\_\_\_\_ years

Pledge payments will begin (month/year) \_\_\_\_\_ and will be paid:

\_\_\_\_ monthly \_\_\_\_ quarterly \_\_\_\_ semiannually \_\_\_\_ annually

\_\_\_\_ Pledge will be paid in full by December 31, 2023

\_\_\_\_ **Check** \$ \_\_\_\_\_ is enclosed.

*Please make check payable to "Envision Unlimited" with "DreamHouse CILA" in the memo line.*

\_\_\_\_ **Stocks, Bonds, Mutual Funds:** \$ \_\_\_\_\_

*Please contact the Development Office to obtain further instructions on transferring gifts of stocks, bonds or mutual funds.*

\_\_\_\_ **Cryptocurrency:** \$ \_\_\_\_\_

*If you would like to make a cryptocurrency donation, please visit*

<https://envisionunlimited.org/donate-crypto>.

\_\_\_\_ **Credit Card/Debit Card**

*Click [HERE](#) to make a donation via credit/debit card.*

\_\_\_\_ **Matching Gift:**

In addition to my own personal gift commitment, \_\_\_\_\_ will match my gift. Please attach the completed form from the company or organization for our files.

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

Spouse/Partner signature (if applicable) \_\_\_\_\_ Date: \_\_\_\_\_

*Please return this form to: Marty Kenahan, Chief Development Officer, Envision Unlimited,*

*8 South Michigan Ave, #1700, Chicago, IL 60603*

*~ Email: [mkenahan@envisionunlimited.org](mailto:mkenahan@envisionunlimited.org) ~ Questions? Please phone: (708)567-0518.*