

# Pledge Form



## PEOPLE FOR A BETTER COMMUNITY

### Mission Statement

To serve as a catalyst in the community: To significantly improve and positively influence the quality of life and social wellbeing for members of the community, irrespective of age, ethnicity and origins.

Non - Profit

### Donor Information (please print or type)

Company \_\_\_\_\_

Name \_\_\_\_\_

Billing address \_\_\_\_\_

City, State Zip Code \_\_\_\_\_

Phone 1 | Phone 2 \_\_\_\_\_

Email \_\_\_\_\_

### Pledge Information

I {we} pledge a total of \$\_\_\_\_\_ to be paid now monthly

I{we} plan to make this contribution in the form of: check credit card other

Credit card type | Exp. Date

\_\_\_\_\_

Credit card number \_\_\_\_\_

Authorized signature \_\_\_\_\_

### Acknowledgement Information

Please use the following name (s) in all acknowledgements: \_\_\_\_\_

\_\_\_\_\_

I (we) wish to have our gift remain anonymous.

\_\_\_\_\_

Signature (s)

Date

Please make checks or other gifts payable to \_\_\_\_\_ | People for A Better Community, Inc.

FL Dept. of Agriculture Consumers Affairs DTN 2981632 | P.O. Box 101835

| Ft. Lauderdale, FL 33310