

BETH DAVID SYNAGOGUE ENDOWMENT FUND PLEDGE AGREEMENT

In support of Beth David Synagogue and the goals of the institution,
I pledge to make gifts in support of the Beth David Synagogue Endowment Fund as follows:

Total Amount _____

<u>AMOUNT</u>		<u>PAYMENT DATE</u>
\$ _____	by	_____, 20 ____.
\$ _____	by	_____, 20 ____.
\$ _____	by	_____, 20 ____.
\$ _____	by	_____, 20 ____.
\$ _____	by	_____, 20 ____.

My pledge commitment will be fulfilled in the following manner over the next five years:

_____ **Check** _____ **Credit Card** _____ **Stock** _____ **Other (please specify)**

For recognition purposes, please include my/our name(s) in the following manner:

_____ (or) I wish for my gift to be anonymous. (Please check box)

Matching gifts can maximize the total amount of your gift. If you, or your spouse, are eligible for a matching gift, please list the matching gift company below:

Pledge Endorsement

Printed Name(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Signature: _____ Date: _____
(spouse, if applicable or needed for matching gift)

Remember, your contribution is tax deductible to the extent allowed by IRS regulations.