



Won't you join us?

P.O. Box 5968 San Antonio, TX 78201

We can only make this ambitious campaign happen with your help. Through your financial support of our lifesaving work, we can make a difference to individuals, families, and our community.



Gift – Pledge Agreement

I/we agree to make the following gift to Lifetime Recovery's Building for Recovery Campaign:

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

(Please provide your address for receipting purposes)

Total Pledge Amount: \$ _____

Pledge will be paid ___ Annually ___ Semi-Annually ___ Quarterly ___ Monthly

over the next ___ 1 ___ 3 years Start Date: ___/___/___

I would like to fulfill my pledge via:

- Transfer of Stock or Securities
Automatic Bank Transfer (please attach voided check)
Credit Card (VISA, MasterCard, Discover, American Express)

(A representative of Lifetime Recovery's business office will give you a call for further details.)

I have enclosed a payment of \$ _____

- To honor the entire pledge
As the initial gift of my pledge schedule

For recognition purposes, please record my/our name as follows:

I/we prefer to remain anonymous.

Signature: _____ Date: _____