



The Red McCombs Recovery Center Gift & Pledge Agreement

Your gift will help complete Phase III, the final phase of our campaign.
Your support will make a difference to thousands of individuals, families, and our community.

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

Name: _____

Organization Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Total Gift/Pledge Amount: \$ _____

Pledge will be paid: Annually Semi-Annually Quarterly Monthly

over the next 1 year 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's development office will call you for further details.)

To honor the entire pledge

As the initial gift of my pledge schedule

I have enclosed a payment of \$ _____

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

I/we prefer to remain anonymous.

Signature: _____ Date: _____