

I/we hereby pledge the sum of \$ _____ over _____ years to the Sonoma State University Foundation for the purpose of: _____

I/we prefer to satisfy this commitment according to the following schedule:

Schedule of Payments

Annually Semi-annually Other: _____

Beginning: (month) _____ (year) _____

Initial payment in the amount of \$ _____ is included.

(Checks shall be made out to the SSU Foundation)

We will send a pledge reminder as a courtesy unless you indicate that you prefer not to receive them.

Do not send pledge reminders

Name(s): _____ Address: _____

Phone: _____ City, State: _____

Email: _____ Zip: _____

Matching Gift

My/our gift may be eligible for matching.

(Please provide any contact information you have about the matching organization.)

Donor Recognition

My/our names as we wish them listed for donor recognition:

Check if what is entered here is correct

Signature: _____ Date: _____

Signature: _____ Date: _____

When completed and signed, please return

either printed or electronic form to:

Sonoma State University
University Advancement, Salazar 2043
1801 East Cotati Avenue
Rohnert Park, CA 94928-3609
Phone: 707.664.2712 | Fax: 707.664.2952
E-mail: advancement@sonoma.edu
Website: <http://www.sonoma.edu/advancement>

Acknowledged by: _____ SSU Authorized Representative _____ Date

A confirmation copy will be returned to you for your records.