

Solving Pr blems. Sparking Hope.



2024 Pledge Form

Total Pledge Amount: \$_____

Length of Pledge: _____ years

I will make the following contribution(s) to support Convergence:

	Gift Amount	Payment Date
2024 Pledge	\$	(If blank, by 12/31/24)
2025 Pledge	\$	(If blank, by 12/31/25)
2026 Pledge	\$	(If blank, by 12/31/26)
2027 Pledge	\$	(If blank, by 12/31/27)
2028 Pledge	\$	(If blank, by 12/31/28)

Pledge Purpose:

□ General Support □ Other:

Payment Options

I plan on fulfilling my pledge as follows (please send additional details as needed):

Check Payable to Convergence Center for Policy Resolution					
Donor-advised fund (I'll personally fulfill the pledge should the funds not be granted)					
□ <u>Online</u>	□ Stock donation				
□ Credit card	□ Wire transfer				
🗆 PayPal	□ Other:				

Company Match (if applicable):

□ My gift is eligible for company match. Company Name: _____

Donor Information

Signature:	 Date:		
Donor Recognition Listing:			
Address 2: City:		Zip Code:	
Address 1:			
Full Name:	 Phone:		

(Required)

(Required)

Please return to Beth Miller, Executive Vice President, at <u>beth@convergencepolicy.org</u>. Thank you for your support!

Convergence is a 501(c)3 organization. Our EIN is 32-0280279. All donations are tax deductible to the fullest extent of the law.