Phoenix, AZ



Est. 1962

	Pledge Agreement
connect, and empower people to and leadership throughout the s conditions indicated below, reco	ith others in support of Arizona Town Hall in its mission to educate, engage resolve issues through consensus to improve the quality of civic engagementate. It is my intent to pay this gift on the schedule, in the form and under to ognizing that this gift is subject to modification if changed conditions should gift to the Arizona Town Hall in the following manner:
_	Gift (please indicate the preferred level of support)
Your donat	tions will entitle you to be listed in our Annual Report.
	□ 60-by-60 (\$60 for 60 Months)
	☐ One-time Payment (\$3,600)
	$\blacksquare$ One time I wyment ( $\varphi 3,000$ )
Other Amount D	<b>Donation Frequency:</b> ☐ Monthly ☐ Quarterly ☐ Bi-Annually ☐ Ann
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Payment can be made by:	<b>Donation Frequency:</b> ☐ Monthly ☐ Quarterly ☐ Bi-Annually ☐ Ann
Payment can be made by:  □ Enclosing a check payable	Donation Frequency: ☐ Monthly ☐ Quarterly ☐ Bi-Annually ☐ Annually ☐ Annuall
Payment can be made by:  □ Enclosing a check payable □ Donor Advised Fund - Nat	Donation Frequency: ☐ Monthly ☐ Quarterly ☐ Bi-Annually ☐ Annually ☐ Annuall
Payment can be made by:  □ Enclosing a check payable □ Donor Advised Fund - Nat □ Credit card (please check t	Donation Frequency: Monthly Quarterly Bi-Annually Annually to Arizona Town Hall me of Fund:
Payment can be made by:  □ Enclosing a check payable □ Donor Advised Fund - Nat □ Credit card (please check t	to Arizona Town Hall me of Fund: type of card)  The description of the
Payment can be made by:  □ Enclosing a check payable □ Donor Advised Fund - Nat □ Credit card (please check to □ MasterCa  Card #:	to Arizona Town Hall me of Fund: type of card) ard  Discover  Expiration:  Auth. Code:
Payment can be made by:  □ Enclosing a check payable □ Donor Advised Fund - Nat □ Credit card (please check t □ MasterCa  Card #: □ Billing Address:	to Arizona Town Hall me of Fund: type of card)  The description of the

PLEASE RETURN THIS FORM WITH YOUR PAYMENT TO: