



BUILDING HEALTHY MINDS & BODIES TOGETHER

JOINT CAPITAL CAMPAIGN

In support of the Two Rivers YMCA & Rock Island Public Library, I/we hereby pledge a total gift of \$ _____

Name(s) _____

Recognize Donation as from
" _____ "

Address _____

Phone _____

I/We wish to make \$ _____ payments:

- | | | | |
|---------------------------------------|------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Monthly | For years: | <input type="checkbox"/> 2020 | <input type="checkbox"/> 2023 |
| <input type="checkbox"/> Quarterly | | <input type="checkbox"/> 2021 | <input type="checkbox"/> 2024 |
| <input type="checkbox"/> Semiannually | | <input type="checkbox"/> 2022 | <input type="checkbox"/> 2025 |
| <input type="checkbox"/> Annually | | | |

Beginning ___/___/202__

Initial payment by check is enclosed.

CHECKS PAYABLE TO TWO RIVERS YMCA

CC Acct. # _____

Exp. ___/___ CCV ____

Bank Draft (please enclose voided check)

Send Reminder

My company, _____

has a matching gift program

I/We would also like to make an endowment gift

Signed _____ **Date** ___/___/202__

Please send completed card to: Two Rivers YMCA, 2040 53rd St, Moline, IL 61265 or email to dmcauley@ymcatr.org