WILKINSBURG COMMUNITY DEVELOPMENT CORPORATION

Company Pledge/Donation Form

DONOR INFORMATION (Please Print)

Company: _____

Contact Name: _____ Title: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

PLEDGE/DONATION INFORMATION

Number of Years	Amount Per Year
1 Year ☐	$ _____
2 Years ☐	$ _____
3 Years ☐	$ _____
Other (___ Years) ☐	$ _____
TOTAL PLEDGE	$ _____
Amount Enclosed	$ _____
BALANCE REMAINING	$ _____

☐ Please invoice me on _____ each year.
Month/Date

PAYMENT INFORMATION

☐ Check Enclosed. Please make all checks payable to Wilkinsburg Community Development Corporation.

☐ VISA ☐ MasterCard

Card Number: _____ Expiration Date: _____

Name on Card: _____ Signature: _____

SIGNATURE:

_____

Printed Name Signature Date

Please mail completed form and payment to:

Wilkinsburg Community Development Corporation
1001 Wood Street
Pittsburgh, PA 15221