



Helping Older Ohioans Resolve Legal And Long-Term Care Problems and Fight Medicare Fraud

## 50<sup>th</sup> ANNIVERSARY CAMPAIGN PLEDGE FORM

Please complete as much information as possible.

I gift/pledge \$ \_\_\_\_\_ in support of the 50<sup>th</sup> Anniversary Campaign.

- Outright gift
- One-year pledge
- Two-year pledge
- Three-year pledge

Gift transmission:

Check/Credit Card/Online    Security Transfer    IRA Charitable Gift Rollover    Other

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

**Please contact me about:**

- A Legacy Gift / Planned Giving
- Naming Opportunities
- Other Ways to Support the Campaign

Please consult with a professional to determine your potential tax benefit. Your financial contribution will be allocated to the 50<sup>th</sup> Anniversary Campaign fund for the advancement of the Pro Seniors' mission for all Ohioans to age with dignity, rights, equity and well-being.

**Signature:** \_\_\_\_\_

**Note:** *Pro Seniors will provide a formal pledge acknowledgement letter after receipt of this form*

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Pro Seniors, Inc. is a 501(c)3, incorporated as a non-profit under the laws of Ohio, IRS Federal Tax ID 31-0887471.

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For office use only:  
Form received by:

Date: