



DONOR/PLEDGE FORM

Donor name(s) _____

Recognition Listing _____

Address _____

City/State/Zip _____

Phone _____ Mobile _____

By signing below, I/we are committing to the following donation/pledge to the Valdez Museum & Historical Archive:

Amount: _____

To Be Used For: New Museum Campaign Education & Outreach Collections & Exhibits
(Check one) General Fund Special Event Other: _____

Notes: _____

PAYMENT INSTRUCTIONS

I am fulfilling the entire pledge at this time.

I will pay the entire pledge on or before _____ (please send me an invoice two weeks prior).

I would like to be billed in _____ installments of \$ _____. Weekly Monthly Beginning on _____

Check enclosed (payable to Valdez Museum & Historical Archive)

Please charge my: Visa MasterCard Discover

Card Number _____ Expires _____ CVV Code _____

Name on Card _____ Zip Code _____

Other method of payment

CONFIRMATION

Signature _____ Date _____

Valdez Museum & Historical Archive is an Alaska 501(c)3 Non-Profit Corporation, Federal Tax ID 92-0159463.
All donations are tax-deductible for the full amount less the value of any goods and/or services received.
For more information, please call (907) 835-2764.

THANK YOU FOR YOUR SUPPORT!