



DONATION/PLEDGE AGREEMENT

DATE: _____
 NAME OF DONOR OR DONATING ORGANIZATION: _____
 PRIMARY CONTACT PERSON: _____
 PHONE(S): _____
 EMAIL ADDRESS: _____
 MAILING ADDRESS: _____

DONATION DETAILS

GIFT IS ENCLOSED: CHECK # _____ DONATION AMOUNT \$ _____

THIS IS A PLEDGE TO DONATE

TOTAL AMOUNT OF PLEDGE \$ _____

SCHEDULE FOR PLEDGE PAYMENT - IF A SINGLE PAYMENT, PLEASE GIVE THE DATE IT WILL BE RECEIVED BY;
 IF YOUR PLEDGE IS TO BE PAID IN INSTALLMENTS, PLEASE DESCRIBE BELOW):

THIS IS A DONATION IN-KIND

DESCRIPTION OF PRODUCT(S) OR SERVICE(S) BEING DONATED:

THIS GIFT IS INTENDED EXCLUSIVELY FOR THE NEW BLUE/EVENING IN BLUE PROGRAMS

 Signature, donor or donor representative

CHECKS PAYABLE TO: Chartwell Consortium EIN #72-1442874 1225 Magazine Street New Orleans, LA 70130	MAIL TO: Evening in Blue c/o Chartwell Center 1225 Magazine Street New Orleans, LA 70130 Attn: Lisa McCaffety-Scott
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