Friends of Hopewell House

Gift Commitment Form

Name(s)	
Name(s) as you would like to be recognized	
Address	
Phone(s) Email(s)	·
Is this a □personal gift OR a □company/organizational gift?	Name of organization, if applicable
I/We commit to Friends of Hopewell House the sum of \$	
Payable: ☐ One time or Over ☐1 year ☐2 years ☐3 years ☐	
Beginning date:/	ve pledge reminders.
☐ Cash	
lacksquare I would like help with other forms of giving, such as stock,	IRA funds, etc. Please note donor
advised funds may not be used to fulfill pledges.	
This gift is in honor/memory (circle one) of:	
Please notify the following about my gift:	
Name Address	
You may publish my/our name(s) in the donor list to inspirI/We would like this to remain anonymous.	
☐ I/We understand that plans are being made based on the	
pledge in the way described. My/Our estate shall be responsi	ble for any unpaid portion of this
pledge should a death occur.	
Signature:	Date:
Signature:	Date:

Please make checks payable to: Friends of Hopewell House, 6164 SW Capitol Highway, Portland, OR 97239. Donations are tax deductible to the extent allowed by law. Questions? Contact inquires@Fhhpdx.org

6164 SW Capitol Highway, Portland, OR 97239 www.friendsofhopewellhousepdx.org * IRS Tax ID: 84-3380179