

SHAPING THE FUTURE

25th Anniversary Campaign



ADVOCACY | EDUCATION | WORKFORCE DEVELOPMENT *for the next 25 years*

AAHPM CAMPAIGN LETTER OF INTENT

AAHPM deeply appreciates your generous pledge of support for our initiatives. Please sign and return *this form only* to the address listed below (**please do not include a check at this time**). After your pledge is documented in our office, you will receive an acknowledgment letter with instructions for making payments for the term of your pledge commitment. Thank you for your support!

GIFT AMOUNT

This pledge is intended to provide a TOTAL GIFT of \$_____ to AAHPM in support of the campaign for the future.

I intend to make an initial payment of \$ _____ towards this commitment.

The balance of this pledge commitment will be paid according to the following schedule (*check one*):

ANNUALLY SEMI-ANNUALLY QUARTERLY

Payable over (*check one*): FIVE YEARS OTHER (*please indicate*) _____

You will receive an acknowledgment letter within 45 days of the return of this form, which will verify the above terms and include the details of your campaign payment schedule based on your pledge's initiation date. You will also receive a statement of your pledge status annually in January for personal tax recording and IRS purposes.

SPECIAL REQUESTS

- I/We would prefer that my/our gift remain anonymous.
- I/We give permission for my/our gift to be listed publicly.
- I would consider serving as a volunteer leader for this campaign.

RECOGNITION

Please indicate how you would prefer your name(s) to be listed for donor recognition purposes:

GIFT DESIGNATION

AAHPM encourages unrestricted pledges, which will be designated at the discretion of the Academy to make the greatest campaign impact. If you wish to designate your AAHPM campaign investment, please indicate your pledge intentions below.

I wish to designate my/our AAHPM campaign investment for one of the following areas:

Unrestricted Advocacy Education Workforce Development

Additional Instructions: _____

SIGNATURE: _____ DATE: _____

PRINT NAME: _____ PHONE: _____

TITLE: _____ EMAIL: _____

AAHPM qualifies for tax-exempt status under Section 501(c) (3) of the Internal Revenue Code as a not-for-profit corporation.
Donors are encouraged to consult their tax advisors for information about the deductibility of these donations.

Please sign and mail this form to: Terrie McKissack c/o AAHPM, 8735 W. Higgins Road, Suite 300,
Chicago, IL 60631 Phone: (847) 375-4712 • Fax: (847) 375-6475 • E-mail: campaign@aaHPM.org