



# Capital Campaign Donor Card

In support of the Lunenburg County Lifestyle Centre, I/we hereby agree to pledge the sum of: \$ \_\_\_\_\_

Paid herewith \$ \_\_\_\_\_ Balance \$ \_\_\_\_\_

The balance will be paid as follows:

\$ \_\_\_\_\_ 2011 \$ \_\_\_\_\_ 2012 \$ \_\_\_\_\_ 2013 \$ \_\_\_\_\_ 2014 \$ \_\_\_\_\_ 2015

Payment Schedule:  Annually  Semi-Annually  Quarterly  Monthly

Preferred Month(s) of Payment: \_\_\_\_\_

I would appreciate receiving a pledge reminder prior to payment due date:  yes  no

I would be interested in a naming / dedication / sponsorship opportunity within the LCLC:  yes  no

My/our gift is to be publicly acknowledged in the name of (please print): \_\_\_\_\_

We/I wish the gift to be anonymous

Please debit my credit card: VISA  MasterCard

Card # \_\_\_\_\_ Expiry date \_\_\_\_\_

Name \_\_\_\_\_

Corporation (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Res. Tel. ( ) \_\_\_\_\_ Bus. Tel. ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

For Office Use - Please leave this area blank

*Cheques should be made payable to Lunenburg County Lifestyle Centre*

LCLC Campaign Office  
Located at 60 Pleasant Street, 4<sup>th</sup> floor, Bridgewater  
Mailing address: PO Box 5, Station M, Bridgewater NS B4V 2W6  
902 541-4374  
ileslie@clc.ca

Registered Charitable Number: 84834 4156 RR0001  
A portion of your gift can reduce income tax within the limits prescribed by law. This statement of intention shall not constitute a legal obligation to make this gift. I reserve the right to adjust or cancel it in the event of unforeseen circumstances.

mm / dd / yy

**THANK YOU FOR HELPING SHAPE THE FUTURE OF LUNENBURG COUNTY!**

Reviewed	