SAN JOSE STATE UNIVERSITY

PLEDGE FORM

Men's Water Polo Fund

We need your support to ensure the long-term success of the program.

We are asking for a 5-year annual commitment or a one-time donation.

MY DONATION	(Please pri	nt)				
1) \$	per year for		ve years, beginning		(month/yea	ar) OR
2) \$		One-Time Donati	ion			
The payment m	ethod by wh	ch I/we plan to ful	fill the commitme	nt:		
Cash or Che	ck 🗖 S	tocks or Bonds	🗖 Payroll De	duction	🗖 Donor Advise	ed Fund
Credit Card	(Please circl	e one: VISA Ma	sterCard Amex)			
Account numbe	r:		Expirat	ion date:		
Name as it appe	ears on card					
Signature:				Date:	<u> </u>	
Name:						
Address:						
Phone:	Day ()		Evening ()		
Email:						
My/Our names a	as we wish tl	nem to have listed	for recognition:			

I would like to be reminded by the Tower Foundation of my annual donation one month before due date:

🗆 Yes 🛛 No

MATCHING GIFT

□ My/Our gift may be eligible for matching by:

Questions	? Contact Fundraising Committee	Mail completed form to:	Acknowledge
Phone: Email:	Day ()	_ Evening ()	
Address:			
Company: Name(s):			

Ed Samuels - ernstpolo@yahoo.com Bill Simpkins - bill@airtalk.com John Wagner - john.wagner@trane.com Bruce Watson - bruce.watson@westvalley.edu Bill Gerdts - william.gerdts@wellsfargoadvisors.com Art Lambert - artlambert@sandpoint.tv

Attn: Tim Rice Tower Foundation San Jose State University One Washington Square San Jose, CA 95192-0184

Acknowledged by:						
SJSU Authorized Representative						

Date	ID#