



INROADS CHARITABLE GIVING FORM



Date: _____

In support of INROADS, Inc. Alumni Giving and Leadership! Campaign, I/we make the following commitment (s):

First Name: _____ MI: _____ Last Name: _____

Email: _____

Home Address: _____

INROADS Regional or Alumni Affiliation: _____

For Fiscal-Year 2010-2011 (June 1, 2010 – May 31, 2011) my contribution to:

Leadership! Campaign \$ _____ Alumni Annual Fund \$ _____

Pledge payments will be made on the following schedule within the year:

Date: _____ Amount: \$ _____ Date: _____ Amount: \$ _____

Date: _____ Amount: \$ _____ Date: _____ Amount: \$ _____

Check enclosed. Please make payable to INROADS, Inc. and mail to the address below.

Credit Card (please indicate type)

MasterCard Visa American Express Other: _____

Card Number: _____

Exp. Date: _____

Name as it appears on the card: _____

Signature _____

Date: _____

I will use securities to make my gift. Please contact me with information about transferring stock.

A matching gift form is enclosed for: my employer Employer name: _____

my spouse's employer both employers

May we publicly recognize your gift? yes no Name as is should appear on Donor List: _____

Call Genette Comfort at 404.586.0352 x4203; Fax: 404-586-9155 or mail your gift to:

Genette Comfort, CFRM
Chief Alumni and Development Officer
INROADS, Inc.
260 Peachtree Street, Suite 400, N.E.
Atlanta, GA 30303

**Thank You! Your Generous Contribution Will Support and Invest in Leaders!!
INROADS, Inc. is a non-profit tax exempt 501(c)3 organization**