



# Alleman Catholic High School

1103 – 40<sup>th</sup> Street, Rock Island, IL 61201  
Phone: (309) 786-7793 Fax: (309) 786-7834  
www.allemanhighschool.org



## Alumni Field Capital Campaign

Name: \_\_\_\_\_ Alleman Grad. Year: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

As an investment in the Alleman Catholic High School, Alumni Field Capital Campaign, I/we hereby agree to pay Alleman Catholic High School the sum of \$\_\_\_\_\_ to be paid in cash, securities or other property in equivalent value.

Signature: \_\_\_\_\_  
*Signature to authorize pledge* *Date*

### Gift/Pledge

The total amount shown above is  an outright gift  a pledge

### Pledge Payment Schedule

Total Pledge Amount \$\_\_\_\_\_ *(please do not include matching gifts)*

Amount Paid Herewith \$\_\_\_\_\_

Balance to be paid as follows:

2017 \_\_\_\_\_

2018 \_\_\_\_\_

2019 \_\_\_\_\_

I would like to receive a pledge payment  
reminder in the following month(s)

JAN FEB MAR APR MAY JUN

JUL AUG SEPT OCT NOV DEC

### Payment Information

I would like to make my gift or first pledge payment in the amount of \$\_\_\_\_\_ by

Check Check Number: \_\_\_\_\_

Credit Card  American Express  Discover  Master Card  Visa

Credit Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_

*Gifts made to Alleman High School qualify as a charitable contribution to an  
IRC Sec. 501(c)(3) organization for federal income, estate and gift tax purposes*

TURN OVER

## Recognition

- YES**, I wish to receive recognition for my gift on the Alleman website and on a permanent structure near the Alumni Field.

Please list my recognition in the following manner

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- YES**, I wish to receive **joint recognition** for my gift on the Alleman website and on a permanent structure near the Alumni Field with the following individual(s).

Please list our recognition in the following manner

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- NO**, I do not wish to receive recognition for my gift on the Alleman website and on a permanent structure near the Alumni Field.

## Matching Gifts

Your employer or spouse's employer may multiply your contribution through a matching gift. Please ask your Human Resources Department for the appropriate form or procedures to request a matching gift and return with your contribution and this form

- my company's matching gift form is enclosed*

## Help Us Stay In Touch

Your preferred e-mail address: \_\_\_\_\_

Your preferred contact phone number: \_\_\_\_\_

## Please return this form to:

Alleman Catholic High School  
Development Office  
1103 40<sup>th</sup> Street  
Rock Island, IL 61201

Follow us on social media for updates to the campaign and progress on this project

**Facebook:** /allemanhighschool **Twitter:** @allemanhs **OR** @AHSPioneers **Instagram:** @allemanhighschool