

Mail the completed form to:
John Lamanca, Endowment Chairman
P.O. Box 1461
Salem, VA 24153

PLEDGE INFORMATION FORM

YES, I would like to support the charitable efforts of the Salem Educational Foundation and Alumni Association, and I intend to make the following OUTRIGHT gifts on an approximated schedule of

\$ _____ per year for the next _____ years,
beginning (month/yr) _____ totaling
\$ _____ (Gifts may be made by cash
check, appreciated stock, bonds, mutual
funds, or other property)

FUTURE SUPPORT THROUGH A PLAN OF DEFERRED GIVING

I have included the Salem Educational Founda-
tion and Alumni Association in my will, in
my life insurance policy, or as a beneficiary
of a trust, annuity. I estimate the present
value of to the SEF&AA to be \$ _____

I am interested in making a gift through a will,
insurance, trust, annuity, life estate, or
retirement account. Please have a repre-
sentative of the Foundation contact me.

CORPORATE MATCHING GIFT

I am making the following gift \$ _____ to
SEF&AA in the following year _____.
In addition to my personal gift
_____ will match my gift.

It is necessary for us to have the following
information in order that you might receive
proper credit for the gift, or so that we might
be able to answer your questions:

Name (Please print) _____
Title _____
Address _____
City _____ State ____ ZIP _____
Home Phone _____ Work _____
SSN# (only needed if specific gift information or
donation is included) _____
Salem School attended and year _____

Signature _____ Date _____

I would like to discuss further assisting the
Salem Educational Foundation. Please contact me.

For more information
Please contact
SEF&AA
P.O. Box 1461, Salem, VA 24153-1461
(540) 389-4558