

Yes, I (we) want to contribute to the Rock Island Capital Campaign for SAL Community Services.

Donor(s): _____

Address: _____

City, State Zip: _____

Phone: _____ ☐ Home ☐ Office Cell Phone: _____

Email: _____ Preferred Contact Method: _____

Recognition Preferences

- How do you prefer to be recognized? _____
- Do you wish to remain anonymous? ☐ Yes ☐ No

Commitment Amount

\$_____, over _____ years beginning on _____ **Up to 5 years**

TOTAL AMOUNT: \$_____

Contribution/Payment Details

☐ **Check enclosed:** (Check # _____)

Please make checks payable to: **SAL Community Services Foundation**

☐ **Credit Card:** ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express
Credit Card #: _____ Exp. Date: _____ CVV: _____
Name as appears on card: _____
Billing Address for Credit Card: _____

☐ **Bank Debit** (EFT - electronic funds transfer): ☐ Checking ☐ Savings
Routing #: _____ Account #: _____
Name as appears on account: _____
Date of bank pull: _____

☐ **Stock:**

Please contact Dave Howell, Quad City Investment Center: dhowell@qcbt.com or 563/388-5436

Additional Information

☐ Please invoice me (us) for my (our) donation as outlined above.

☐ My (our) gift will be matched by: _____
☐ Matching gift form enclosed
☐ Matching gift form will be forwarded via mail or email

Signature for Authorization: _____

SAL Community Services Foundation Federal ID: 39-2407274

Because of your generous support, SAL Community Services will be able to deliver our mission to strengthen children, families, and individuals to build and enhance thriving communities at a new site for the Skip-a-Long Rock Island Campus!

Please send contributions and/or questions to:

Luis S. Moreno | Vice President of Development | (309) 207-8778 | lmoreno@salcommunityservices.org
SAL Community Services, 3800 Avenue of the Cities, Suite 108, Moline, IL 61265