

**Valentine Foundation
Visionary Leadership Fund
Pledge and Payment Form**

Name: _____
(Please write name as you would like it to appear on recognition materials)

I/We would not like to be recognized on any materials and wish to remain Anonymous.

Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Telephone Number(s): _____

Signature: _____ Date: _____

I/We have enclosed a check in the amount of \$_____.

I/We will contact Alexandra Frazier about making a gift of securities in the amount of \$_____.

Please note that this pledge is in honor or memory of:_____.

Please circle honor or memory above and indicate any acknowledgement instructions in the space provided below:

_____.

My employer (or related organization) _____ will match portions of this gift. I will send the Matching Gift Form to the Valentine Foundation.

Please make checks payable to and mail to:

**Valentine Foundation
c/o Alexandra V.A. Frazier
409 Merion Hill Lane
West Conshohocken, PA 19428**

The official registration and financial information of the Valentine Foundation may be obtained from the Pennsylvania Department of State by calling toll-free within Pennsylvania 1-800-732-0999. Registration does not imply endorsement.