



YMCA of Tacoma—Pierce County
Partners For Youth 2006

907016

Mary and Jack Watercan

659 34th Ave CT E
Tacoma, WA 98465

Home Phone: 253-876-4512
Business Phone: 253-645-1234
callmeformadonation@givemoney.org

Please consider asking for a gift increase
10% increase = \$1,100
15% increase = \$1,150
20% increase = \$1,200

Donor has a plaque and a new date tab will automatically be mailed at the end of the campaign. (Please confirm)"

Donor wishes to remain anonymous.

Desiring to share with others in maintaining and extending vital YMCA youth programs. I hereby agree to the following 2006 donation option:

Payable: Quarterly Monthly Payment in full on
Check one (Mar, June (10 months) starting March _____
Sept, Dec.)

Payment by VISA, MC or American Express

Card# _____ Expiration Date: _____

Payment using gifts of stock Please contact Financial Development office @ 253.460.8802

Donor's Signature _____
If donor is not available please describe how gift was secured (i.e. phone, email)

James Johnson

Forman Team
Ketner Division

Giving History

2005: \$1,000
2004: \$900
2003: \$800
2002: \$700
2001: \$0.00
2000: \$0.00
1999: \$0.00
1998: \$0.00
1997: \$0.00

Total Gift
Cash or Pledge

\$ **Thank You**

Enclosed Payment

\$

Balance pledged

\$

Please turn card over for additional information



YMCA of Tacoma—Pierce County
Partners For Youth 2006

907016

John Smith

123 Main St
Tacoma, WA 98466

Home Phone: 253-555-9876
Business Phone: 253-444-7894
ilovethey@ymca.net

Please consider asking for a gift increase
10% increase = \$825.00
15% increase = \$863.00
20% increase = \$900.00

Donor does not have a plaque. If gift is \$150 or greater and a plaque is requested please fill out back for engraving

Donor wishes to remain anonymous.

Desiring to share with others in maintaining and extending vital YMCA youth programs. I hereby agree to the following 2006 donation option:

Payable: Quarterly Monthly Payment in full on
Check one (Mar, June (10 months) starting March _____
Sept, Dec.)

Payment by VISA, MC or American Express

Card# _____ Expiration Date: _____

Payment using gifts of stock Please contact Financial Development office @ 253.460.8802

Donor's Signature _____
If donor is not available please describe how gift was secured (i.e. phone, email)

Susan White

Bolton Team
Zoltani Division

Giving History

2005: \$750.00
2004: \$200.00
2003: \$0.00
2002: \$0.00
2001: \$0.00
2000: \$0.00
1999: \$0.00
1998: \$0.00
1997: \$0.00

Total Gift
Cash or Pledge

\$ **Thank You**

Enclosed Payment

\$

Balance pledged

\$

Please turn card over for additional information