



DONOR INFORMATION				
Donor(s)				
Address				
City		State	ZIP	
Phone		Email		
Are you a member of the American Legion: \Box Yes \Box N	No	Member number		

TERMS OF PLEDGE	METHOD OF PAYMENT(S)		
I am supporting the 1919 Society with a pledge total of:	 Check - Make checks payable to: American Legion Veterans and Children Foundation - 1919 Society Credit card Visa MC AmEx Discover 		
Today with a single payment			
Over the next year, beginning on (date):	Credit Card Number	Exp. Date	
 Over the next years, beginning on (date): Please bill me 	Planned Gifts and Stock - Please contact The American Legion Office of Charitable Gifts toll free at 833-257-0955 or by email at CharitableGiving@legion.org		
 Annually Quarterly 	□ Other		
Monthly Other	My/Our gift will be matched by		
	Matching gift enclosedMatching gift form will be sent		

By electronically signing this 1919 Society Pledge Commitment (pledge commitment) I/we agree that this is a legally binding contract to give the amount(s) specified above to the American Legion Endowment Fund Corporation, doing business as American Legion Veterans and Children Foundation (ALVCF) and the ALVCF accepts such pledge/donation. I/we agree that the terms of this pledge commitment is legally binding upon and enforceable against me/us and my/our respective successors and heirs, including without limitation, my/our estate(s) and executor(s). This pledge commitment shall be governed by and interpreted under the laws of the State of Indiana. The ALVCF is a not-for-profit, tax–exempt organization under the provisions of Internal Revenue Code section 501(c)(3). The ALVCF's federal tax identification number is 35-6039680. Donations are tax-deductible to the extent allowed by law.

Donor Signature	Date
Donor Signature	Date

Thank you for your charitable contribution.

American Legion Veterans & Children Foundation P.O. Box 1055

Indianapolis, IN 46206