

## **Pledge Commitment Form**

Thank you for pledging your support to The Lakeland Foundation! Please complete and sign this form, download it, and mail it to The Lakeland Foundation, 7700 Clocktower Dr., Kirtland, OH 44094. **Please make checks payable to "The Lakeland Foundation."** For questions or assistance regarding your pledge, please call Tracy Morris at 440.525.7556.

		Zin	
		Zip:	
Phone/Cell:		Email:	
pledge a total amou	Int of \$	to The Lakeland Fo	oundation in support o
] Foundation's areas	of greatest need	(Unrestricted)	
∃ Student Hunger Fu	nd (Lakeland Care	es Cupboard)	
Student Immediate	Needs Fund		
∃ General scholarship	D		
□ Specified fund, prog	gram, or scholarsh	nip:	
will make my payme			
	pledge reminder c	n this date:	
<b>OR</b> I plan to pay my ple	edge as follows:		
\$	by		
Ψ			

I'm not sure if my company will match my gift. Please contact me with more information.

Signed:	Date:

Please make checks payable to "The Lakeland Foundation."