

The Camp Howard Completing the Vision Campaign

NAME	
ADDRESSCITY	ZIP
PHONEEMAIL	
I would like to contribute to <i>The Camp Howard Completing the Vision Campaign</i> Total 3-Year Pledge \$ Payment Schedule: Year 1: \$ Year 2: \$ Year 3: \$ My gift will be paid: □ Monthly □ Quarterly □ Annually beginning with first payment on CREDIT CARD □ VISA □ MASTERCARD □ AmEx □ Discover Acct. # Security Code	□ I have named CYO/Camp Howard in my estate plan. □ Please send me information about including CYO/Camp Howard in my estate plan.
Signature OVO (0	Date

Please make your tax-deductible check payable and send to: **CYO/Camp Howard •** 825 NE 20th Ave. #120 Portland, Oregon • 97232 503-231-9484 • **www.cyocamphoward.org**

The Camp Howard Completing the Vision Campaign Suggested Pledge Plans

Total 3-Year Pledge = 36 monthly payments or 12 quarterly payments or 3 annual payments

\$25,000	\$695	\$2,084	\$8,334
\$15,000	\$417	\$1,250	\$5,000
\$10,000	\$278	\$ 834	\$3,334
\$ 5,000	\$139	\$ 417	\$1,667
\$ 3,000	\$ 84	\$ 250	\$1,000
\$ 1,500	\$ 42	\$ 125	\$ 500
\$ 1,080	\$ 30	\$ 90	\$ 360
\$ 720	\$ 20	\$ 60	\$ 240