



Tompkins Learning
Partners

Literacy for Life Campaign

STATEMENT OF INTENT

YES, I/we wish to make a gift or pledge of \$_____ to enhance and expand literacy services.

Name/s: _____

Address: _____

City/State/Zip _____

Phone: _____ e-mail: _____

My/our gift will be made in the form of:

_____ Cash/check _____ Securities _____ Credit card

_____ Card number

_____ exp. date

_____ I/we prefer to make payments over 2 years

_____ / _____ month/year \$ _____ pledge payment

_____ / _____ month/year \$ _____ pledge payment

Signed _____ Date _____

Please list our name/s in any publications or campaign recognition as:

Return signed form to: Tompkins Learning Partners, 124 West Buffalo Street, Ithaca, NY 14850

607-277-6442 email: literacy@TLPartners.org www.TLPartners.org