



SONOMA STATE UNIVERSITY PLEDGE COMMITMENT

I/we hereby pledge the sum of \$ _____ over _____ years to the Sonoma State University Academic Foundation for the purpose of: _____.

I/we prefer to satisfy this commitment according to the following schedule:

Schedule of Payments

Annually Semi-annually Other:

Beginning: (month) _____ (year) _____

Initial payment in the amount of \$ _____ is included.

(Checks should be made out to the SSU Academic Foundation)

Pledge reminders will be sent as a courtesy unless you indicate that you would prefer not to receive them.

Do not send pledge reminders

Name(s): _____ Address: _____

Phone: _____ City, State: _____

Email: _____ Zip: _____

Matching Gift

My/our gift may be eligible for matching.

(Please provide any contact information you have about the matching organization.)

Donor Recognition

My/our names as we wish them listed for donor recognition:

Signature: _____ Date: _____

Signature: _____ Date: _____

Mail completed form to:

Sonoma State University
University Development
1801 East Cotati Avenue
Rohnert Park, CA 94928-3609

A confirmation copy will be returned to you for your records

Acknowledged by: _____ SSU Authorized Representative _____ Date
