



# Friends of Lakeshore State Park Visitor and Education Center Campaign

## Gift Commitment Form

### CONTRIBUTION INFORMATION:

I/We \_\_\_\_\_ am/are pleased to contribute to Friends of Lakeshore State Park's Visitor and Education Center Campaign in the amount of \$ \_\_\_\_\_ for the following designation(s):

Capital: \$ \_\_\_\_\_

Endowment: \$ \_\_\_\_\_

TOTAL GIFT: \$ \_\_\_\_\_

My/Our one-time payment is enclosed.  My/our first payment of \$ \_\_\_\_\_ is enclosed.

Pledge: I/ We will fulfill this pledge over \_\_\_\_ years via the following payment schedule:

\$ \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_

\$ \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_

\$ \_\_\_\_\_ Year \_\_\_\_\_ Month \_\_\_\_\_

Please send pledge reminders:  Annually  Quarterly

### PAYMENT INFORMATION

Friends of Lakeshore State Park, Wisconsin Department of Natural Resources  
500 N. Harbor Dr. Milwaukee, WI 53202  
admin.asst@friendslsp.org

Please charge my/our credit card: (MC/Visa/Discover)

# \_\_\_\_\_ Exp \_\_\_\_ / \_\_\_\_ Security # \_\_\_\_\_

I/We will be transferring stock in the amount of: \_\_\_\_\_

## MATCHING GIFT INFORMATION:

My/Our employer will match our gift.

Company Name \_\_\_\_\_

## RECOGNITION OPPORTUNITIES

In Friends of Lakeshore State Park's campaign publications, please list my/our name(s) as follows:

\_\_\_\_\_

My/Our gift is anonymous

My/Our gift is in memory/honor of \_\_\_\_\_

I/We would like to discuss recognition opportunities.

*Campaign recognition opportunities are for a minimum of fifteen years. When the time comes to update recognition opportunities, current donors will be given the first opportunity to sustain their support at the level that is appropriate at that future time.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

*Contributions are tax deductible as provided by law. EIN 20-2742766.*

*Please make checks payable to Friends of Lakeshore State Park.*

\*Please note that if you are interested in fulfilling your commitment through a Donor Advised Fund, we ask that you complete our Donor Gift Intention form, which can be requested at [admin.asst@friendslsp.org](mailto:admin.asst@friendslsp.org).

