

PLEDGE CARD

YES

I (we) would like to support
The Upper Arlington
Legacy Capital Campaign

CONTACT _____

NAME RECOGNITION* _____

*PLEASE LIST YOUR NAME(S) HOW YOU WISH TO BE RECOGNIZED FOR
ACKNOWLEDGMENT PURPOSES • LEAVE BLANK TO DECLINE

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

E-MAIL _____

TOTAL AMOUNT OF PLEDGE*

\$

- My check made payable to
UA Schools is enclosed
- Please contact me to arrange
payment by credit card or stock

*ALL GIFTS CAN BE PAID OVER A FIVE YEAR PERIOD

SIGNATURE*



SIGNATURE & DATE

*PLEASE SEE BACK FOR PLEDGE AGREEMENT DETAILS

QUESTIONS?

Please contact Mary Seidelmann

☎ (614) 487-5007 EXT 1117 ✉ mseidelmann@uaschools.org

PLEDGE AGREEMENT

Upper Arlington City School District Board of Education (“District”) in support of the Upper Arlington Legacy Capital Campaign, 1950 North Mallway Drive, Upper Arlington, OH 43221.

I. By signing this Pledge Card, I wish to give evidence of my interest in and support of the Upper Arlington Legacy Capital Campaign.

II. I do so in consideration of the ongoing efforts of the District to solicit funds for the Upper Arlington Legacy Capital Campaign. I recognize the District will incur expenses in anticipation of payment of my pledge and will rely on my pledge in seeking commitments and pledges from others.

III. Based upon these considerations and in consideration of the commitments of others, I pledge and agree to pay to the District, the total sum listed on this pledge card payable in cash or negotiable property of equal value, which value shall be mutually agreed to by the District and me, my successors, heirs or assigns, as the case may be, from time to time hereafter. The overall goal for the use of this pledge or gift is to fund the Legacy Capital Projects Fund and related expenses associated with that fund. I understand the District may use the funds, at its sole discretion, to pay for the expenses incurred by the District during the campaign, including the repayment of indebtedness.

IV. Payments towards the principal balance of this pledge will be made by me in accordance with the schedule coordinated; however, I can prepay this pledge at any time.

The District will submit to me a statement of the balance due not less than annually at the address set forth on this pledge card or at such other address as I may direct in writing.

V. I acknowledge that this pledge constitutes a legal and moral obligation to pay the amounts stated and that the District is acting and will act in specific reliance upon this pledge commitment.

VI. I authorize the District to list my name as a contributor in its efforts to secure similar commitments from others. Unless otherwise noted here, my name will be listed.

Gifts to the District are tax-deductible to the fullest extent of the law as no goods or services are provided in consideration of a gift.