



Contribution Pledge Form

Lake Havasu Museum of History
320 London Bridge Rd
Lake Havasu City, AZ 86403
info@havasumuseum.com | havasumuseum.com

CONTRIBUTOR INFORMATION (Your personal information is kept confidential)

Last Name: _____, First Name: _____ MI: _____
Street Address: _____ City: _____ State ____ Zip _____
Telephone Numbers: Home (____) _____ Work: (____) _____
E-mail Address: _____

I would prefer that this contribution and/or my name be kept confidential. Thanks!

DONATIONS

A ONE-TIME DONATION, IN THE AMOUNT OF:

\$5,000 \$2,500 \$1,000 \$ 500 \$100 \$50 Other: \$ _____

A REPEATING DONATION, AS FOLLOWS:

A sum of \$ _____ Once Every Month Quarter Year, amounting to a Total of \$ _____

MATCHING CONTRIBUTIONS

Does your employer match donations? YES / NO

Please enclose a signed Matching Donation Form from your employer if applicable

METHOD OF PAYMENT

Check enclosed: Please make checks payable to "Lake Havasu Museum of History"

Please bill my credit card: Card type: Visa Mastercard American Express Discover

Account number: _____

Expiration Date: _____ CVV: _____

NOTES

- Contributions to the Lake Havasu Museum of History are deemed charitable under section 501(a) of the internal revenue code as an organization described in Section 501(c)(3). U.S. Federal Tax ID 761111111. Please consult your accountant for any clarifications.
- Payments must be received before the end of the year to be eligible for a tax deduction in that year.
- There is no minimum contribution amount.

Please forward completed form and payment to:
Lake Havasu Museum of History
320 London Bridge Rd, Lake Havasu City, AZ 86403

Confirm your Contribution

Signature: _____ Name: _____ Date: _____