



PLEASE RETURN FORM TO:
Banking on the Arts Capital Campaign
c/o Downtown Hazleton Alliance for Progress
8 W. Broad Street, Suite M-1490
Hazleton, PA 18201
570-455-1509 x 109

Gift Agreement

Donor Information (please print or type)

NAME/COMPANY _____

PRIMARY CONTACT _____

BILLING ADDRESS _____

CITY, STATE, ZIP CODE _____

PHONE 1 | PHONE 2 _____

EMAIL _____

Gift Information

I/we agree to make the following gift to the Downtown Hazleton Alliance for Progress for its Banking on the Arts Capital Campaign, intending to be legally bound hereby (amount): \$ _____

I/we plan to make this contribution in the form of: cash check stock

Total donation will be paid in:

ONE LUMP SUM or MULTIPLE YEARS of \$ _____ per year for _____ years.

Special instructions (specify years if multiple, up to five): _____

Enclosed is a payment of: \$ _____

[checks should be made payable to the Downtown Hazleton Alliance for Progress, 501c3 EIN: 46-4210453]

Acknowledgment Information

Please use the following name(s) on the Donor Sign: _____

I (we) wish to have our donation remain anonymous.

SIGNATURE(S)

DATE