

I want to pledge my support to the Virginia Orthodontic Endowment. I agree to donate the proceeds of full fee orthodontic cases **OR** give a monetary donation based on the following terms:

- One full fee case per year for five consecutive years.**
- One full fee case every other year for ten consecutive years.
- I can't contribute at this time but will make a commitment of one case per year for five years beginning in 20\_\_\_\_\_.
- I can't contribute at this time but will make a commitment of one case every other year for ten years beginning in 20\_\_\_\_\_.
- I can't contribute at this time but will make a commitment to give \_\_\_\_\_ sometime in the future/in my lifetime.
- I have fulfilled my pledge, but I would like to continue to give \_\_\_\_\_ per year for \_\_\_\_\_ more years.
- I want to give/make a donation of \$1,000.
- Other: \_\_\_\_\_.
- [Donate to the VAOF Endowment Fund online \(www.vaof.org/the-endowment.html\).](http://www.vaof.org/the-endowment.html)

Name: \_\_\_\_\_

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

Return to: Virginia Orthodontic Foundation Endowment  
c/o Darlene Johnson  
VCU Dept. of Orthodontics  
520 N. 12<sup>th</sup> Street, Room 111  
Richmond, VA 23298

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Place  
Stamp  
Here

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