

AAUW Bluegrass Central Foundation Pledge for 2024-2025

Name:	
Mailing Address:	
Phone #:	
Giving level:	☐ Rev. Dr. Pauli Murray (\$25/month)
_	□ Patsy Takemoto Mink (\$20/month)
	☐ Dr. Mary Edwards Walker (\$15/month)
	☐ Celia Cruz (\$10/month)
	☐ Zitkala-Sa (\$5.00)
I am participa	ating as (choose one):
☐ An	Individual ☐ A Company/Corporation
Select ONE of the following payment options:	
☐ Moi	nthly ☐ Paid in one lump sum for the year
☐ Qua	arterly
My method of payment will be (choose one):	
amour	heck (payable to AAUW Bluegrass Central Foundation) for the selected nt sent to the Foundation Treasurer, Robinil Jameson, P.O. Box 151, fort, KY 40602.
at CCI will giv	electronic deposit from my financial institution to the Foundation account U in Frankfort, KY. (If this method is chosen, the Foundation Treasurer we you the CCU account number and you will need to work with your bank up the transfer.)
	Date:
For Foundation	n Treasurer only:
	(date) Acknowledged: (date)