

**Travelers Aid Society of Los Angeles  
Pledge Agreement**

Part A: Donor Information

Name:

Address:

Spouse Name:

Phone:

Fax:

Email:

Part B: Company Information

Company Name:

Address:

Phone:

Fax:

Email:

Contact/Title:

Part C: Pledge Information

Please allocate my pledge of \$ \_\_\_\_\_ to Travelers Aid Society of Los Angeles':

- Annual Campaign
- Transportation Fund
- Capital Campaign
- Endowment Fund

Give primary recognition to:  Donor  Donor and Spouse  Company

My gift will be matched by \_\_\_\_\_  My employer  My spouse's employer

Part D: Payment Information

Payment Schedule:

Annual Payments of \$ \_\_\_\_\_ to begin on \_\_\_\_\_ for \_\_\_\_\_ years

Quarterly Payments of \$ \_\_\_\_\_ to begin on \_\_\_\_\_ for \_\_\_\_\_ years

Monthly Payments of \$ \_\_\_\_\_ to begin on \_\_\_\_\_ for \_\_\_\_\_ years

Other: \_\_\_\_\_

My preferred method of payment is:

Check made payable to Travelers Aid Society of Los Angeles

Bill my credit card # \_\_\_\_\_ (VISA, MC, American Express, Discovery Card)  
with expiration date \_\_\_\_\_ and CSC # \_\_\_\_\_ (or go to [www.tasla.org](http://www.tasla.org))

\_\_\_\_\_ shares of \_\_\_\_\_ stock

Part E: Signature

Print Name:

Signature:

Date: