



Thank you for your support of
Montessori de Terra Linda's Annual Fund

I/we would like to **pledge** a gift to the Annual Fund of \$ _____ to be made on _____. (All donations must be received on or before June 30, 2018)

I/we would like to make a one-time gift to the Annual Fund of \$ _____

Check enclosed, made payable to MdTL Annual Fund

Credit Card (indicate credit card information below)

Please add credit card processing fee to my donation

Stock Donation (Schwab account under the name of Montessori de Terra Linda - Account #: 8394-4018 and ABA #:071000013)

Installment Payments: I wish to pay \$ _____ monthly

Include with my monthly MdTL billing (final installment June 2018)

Credit Card (indicate credit card information below - final installment June 2018)

Please add credit card processing fees to my donation

* * *

Matching Gift: Enclosed is my employer's matching gift form

Please **do not** include my name in your **donor recognition lists**

* * *

Credit Card: Visa MasterCard American Express

Card no. _____ Exp. Date _____ 3 or 4 Digit Security Code _____

* * *

Name (as you would like it to appear in the Annual Report) _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Alumnus/a Current parent Alumni Parent Grandparent Friend

* * *

All gifts are tax-deductible. Please accept our warmest gratitude for your contribution.
You will receive an acknowledgement for your gift in the mail.

Montessori de Terra Linda • 610 Del Ganado Road • San Rafael, CA 94903 • 415.479.7373 • www.mdtl.org
Federal Tax ID #68-0360702



Levels of giving

- Patron**
\$10,000 and up
- Leader**
\$5,000 - \$9,999
- Benefactor**
\$2,500 - \$4,999
- Sponsor**
\$1,000 - \$2,499
- Friend**
\$500 - \$999
- Associate**
\$250 - \$499
- Contributor**
\$1— \$249