

PLEDGE FORM

DignityMoves: Building Hope for the Homeless DignityMoves Fast Forward Fund

\$100 Million in 3 Years Campaign Pledge Commitment

Together, we can build a brighter future for the homeless in our community. The Fast Forward Fund for DignityMoves aims to raise \$100 million over the next three years to fight homelessness. By pledging your support, you are not only providing financial assistance but also empowering individuals and families to lead a life of dignity.

Payment Schedule (please select one):		
□ One-time payment: I will fulfill my pledge with a one-time payment of \$	on	(date).
□ Annual payments: I will fulfill my pledge through annual payments of \$ years, up to 3 years) starting on (date).	_over	(number of
☐ Quarterly payments: I will fulfill my pledge through quarterly payments of \$_ (number of quarters, up to 12 quarters) starting on (date).		over
☐ Monthly payments: I will fulfill my pledge through monthly payments of \$ of months, up to 36 months) starting on (date).	over	(number
□ Pending transaction(s): I will fulfill my pledge through payment(s) of \$ transaction(s) or deal(s) that are currently pending. Payment(s) will be made within after the closing of the transaction(s) or deal(s). Notes:	(r	number of days)
Payment Method (please select one):		
□ Check: I will make my payments via check, payable to DignityMoves, and maile Francisco, CA 94115.	ed to 2406	Bush Street, San
☐ Credit Card: I will provide my credit card information to DignityMoves via phone o	r secure onl	ine portal.
$\hfill \square$ Bank Transfer: I will set up a bank transfer for the pledge amount to DignityMoves with the necessary bank details.	s' account. P	lease provide me
□ Other:		

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Initials:



Recognition Preferences (please select one):

☐ I am happy for DignityMoves to recognize my donation publicly.	
□ I would like my donation to be recognized anonymously.	
By signing below, I acknowledge that this pledge is a good faith intention to contribute the indicated amo DignityMoves' \$100 Million in 3 Years Campaign. I understand that this pledge is not legally binding and that modify or cancel it at any time by notifying DignityMoves.org in writing.	
Donor Signature: Date:	
Name(s):	
Legal Entity (if any):	

Please return this completed pledge form to:

DignityMoves

Phone:

2406 Bush Street San Francisco, CA 94115 Tax I.D. = 87-1111468 holly@dignitymoves.org

Thank you for your generous support in our mission to fight homelessness and restore hope to those in need. Together, we can make a lasting difference.