



HISTORIC ALBANY FOUNDATION ANNUAL APPEAL

(this gift is in addition to membership dues)

ENCLOSED IS MY PAYMENT:

- Check Enclosed Credit Card

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL

CREDIT CARD

EXP

2011 CONTRIBUTION AMOUNT

- \$1,000 \$500 \$250 \$100 \$50
 \$____ Other

OR

12 MONTH PLEDGE:

- \$100 a month (equal to \$1200 a year)
 \$50 a month (equal to \$600 a year)
 \$25 a month (equal to \$300 a year)
 Please charge my credit card once a month for 12 consecutive months at \$____ for a total donation of \$_____