



Donor Intent Form

DONOR INFORMATION

Donor name(s) for gift crediting and acknowledgment purposes

Donor display name(s) to be published for gift recognition, if different from above

I do not want my name published for purpose of recognition.

Program (Name of Fund):

Address

Phone

City

State

Zip

Email

GIVING METHOD

This commitment will be paid to Baton Rouge Community College Foundation in the following manner:

Option #1: One-time. (Check enclosed made payable to Baton Rouge Community College Foundation) One-time gift in the amount of \$

Option #2: Credit Card. For secure credit card processing, please visit <https://nursing.mybrcc.edu/#invest>

Option #3: Pledge. Total amount of pledge \$ Monthly Quarterly Annually

Pledge Payment Schedule

<u>Year</u>	<u>Month</u>	<u>Amount</u>

Ensure 100% of Your Gift is Applied to Impact!

By selecting this option, you can choose to include an additional gift of 5% to cover the management fee associated with administrative and development costs. This contribution ensures that 100% of your original gift goes directly toward the programs you wish to support while also helping sustain the foundation's operational needs.

Total of Additional Gift \$

Matching Gift

Yes, my employer matches gifts.

Company Name:

I have enclosed the matching gift form.

I will send the form at a later date.

Authorization

Print Name

Title (if applicable)

Signature

Date