

# ENSURING OUR PATH TOWARD EXCELLENCE... PERGÉ!

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## I WOULD LIKE TO DESIGNATE MY GIFT:

in memory of \_\_\_\_\_

in honor of \_\_\_\_\_

Donors who give \$1,000 or more will be recognized in appropriate giving categories in all campaign publications, and donors who give \$1,969 or more will be recognized on a permanent plaque, unless otherwise requested.

Neither Phi Gamma Delta nor MS FIJI Inc. provide tax, accounting, or legal advice. You should review any planned financial transactions or arrangements that may have tax, accounting, or legal implications with your personal/professional tax advisors.

# MS FIJI INC.

Non-Tax Deductible

*I pledge and agree to pay*

## MS FIJI INC.

the sum of \$\_\_\_\_\_.

*I will make my gift according to the following schedule:*

\$\_\_\_\_\_ on \_\_\_\_\_  
(Amount) (Included or Date)

\$\_\_\_\_\_ on \_\_\_\_\_  
(Amount) (Date)

\$\_\_\_\_\_ on \_\_\_\_\_  
(Amount) (Date)

\$\_\_\_\_\_ on \_\_\_\_\_  
(Amount) (Date)

\$\_\_\_\_\_ on \_\_\_\_\_  
(Amount) (Date)

Other \$ \_\_\_\_\_ (one-time gift)

### MONTHLY DRAFT

Start date: \_\_\_\_\_ Amount of each payment: \_\_\_\_\_

Number of payments to process (maximum 60): \_\_\_\_\_

*Please complete and return with this pledge card the draft form found at <http://www.msfiji.com/draftform.html>.*

### MS FIJI INC. NEEDS YOUR SUPPORT

Contributions to MS FIJI Inc. are not deductible as charitable contributions for federal income tax purposes but are essential in achieving the goal of retiring our mortgage and renovating the Chapter House.

**MAKE CHECKS PAYABLE TO**  
MS FIJI Inc.

Memo: Sigma Mu Campaign Fund

**MAIL ALL FORMS TO**  
MS FIJI Inc.  
P.O. Box 1848  
Starkville, MS 39760-1848