



PLEDGE OF CONTRIBUTION

Please accept my/our pledge of a \$500 contribution to the Scholarship Endowment Fund of the Lyons Community Foundation. Upon complete payment of the pledge, please include my/our name(s) on the Scholarship Founders' Plaque, located at Lyons-Decatur Northeast School. Payment of my/our pledge of \$500 will be made in the following manner:

_____ Payment in full by _____
(Date)

_____ Two annual installments of \$250.00 each. The First installment is enclosed or will be paid by _____
(Date)

_____ Four annual installments of \$125.00 each. The First installment is enclosed or will be paid by _____
(Date)

_____ Five annual installments of \$100.00 each. The First installment is enclosed or will be paid by _____
(Date)

Contributions larger than the above amount may be paid in full or pro-rated in the above manner.

Please print your name(s) exactly as you wish it/them to appear on The Scholarship Founders' Plaque:

If you wish an inscription/dedication/memorial in addition to your names, please print in clearly on the lines below:

Name: _____ Signature: _____ Date: _____