



Commitment Intent Form

I/we wish to make the following commitment to benefit **NC State University** and the *Think and Do the Extraordinary* campaign:

➤ Area of Support

Designation(s) _____

➤ Commitment Information

TOTAL COMMITMENT _____ Pay in full Pledge

*Do not include matching gifts in commitment amount. You will receive recognition (soft) credit for matching gifts.
Make checks payable to:*

PLEDGE DETAILS

Pledge may not exceed five years.

Annually Semi-annually Custom*
 Quarterly Monthly *Complete schedule on attached page

of Years _____ Payment Amount _____

First Payment Date _____ # of Payments _____

Pledge reminders will be sent prior to each scheduled payment date.

Do not send pledge reminders

➤ Additional Options

I/we will donate through a **donor advised fund** or **family foundation** and acknowledge personal responsibility to satisfy this commitment in order for it to be recognized fully to the designation
Organization: _____

NC State University can also expect to receive a **matching gift** in the amount of _____ from the following company/organization: _____

I/we would like to designate this commitment in honor / memory of _____

➤ Donor Information

Name / Organization

Name

Signature Date

Signature Date

Phone

Phone

Email

Email

Address

City _____ State _____ Zip Code _____

To support our fundraising efforts an administrative fee may be assessed on gifts designated for current operations or facilities. Visit go.ncsu.edu/gaf for more details.