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PLEDGE FORM

Name (Please print information as you would like it to appear in our records.) _____ Date _____

Employer _____

Home Address _____

City _____ State _____ Zip _____

Preferred Email _____ Preferred Phone _____

YOUR SUPPORT I pledge my support to Community Shares of Wisconsin as follows:

I authorize my employer to deduct the amount of \$ _____ each pay period in **2024**
 for _____ pay period(s) until my pledge of \$ _____ is paid in full.

Authorization signature: _____

I have enclosed a check/cash gift in the amount of \$ _____
 (Make checks payable to Community Shares of Wisconsin.)

I am charging my gift in the amount of \$ _____
 Visa Mastercard Discover American Express

Card # _____ Expiration Date _____

Signature _____ Date _____

Please bill me in the amount of \$ _____ In December 2023 In January 2024

I would like to give a gift of stock, please send details.

Please send me information about making a planned gift.

YOUR CHOICE

A gift to Community Shares supports **ALL** member nonprofits: \$ _____.

And/Or I direct a total of \$ _____ to the member nonprofits as indicated
 on the next page.

} My gift total
 for the year is
 \$ _____

Please direct the following amounts annually to the designated CSW member nonprofits:

- | | |
|---|---|
| \$ _____ 1000 Friends of Wisconsin | \$ _____ The Progressive |
| \$ _____ ABC for Health | \$ _____ Project Home |
| \$ _____ ACLU of Wisconsin Foundation | \$ _____ Rape Crisis Center |
| \$ _____ Bayview Foundation | \$ _____ REAP Food Group |
| \$ _____ Center for Media and Democracy | \$ _____ River Alliance of Wisconsin |
| \$ _____ Chrysalis | \$ _____ Rock River Coalition |
| \$ _____ Citizens Utility Board | \$ _____ Rooted |
| \$ _____ Clean Wisconsin | \$ _____ Sierra Club Foundation - Wisconsin Chapter |
| \$ _____ Common Wealth Development | \$ _____ Sustain Dane |
| \$ _____ Disability Rights Wisconsin | \$ _____ Tenant Resource Center |
| \$ _____ End Domestic Abuse Wisconsin | \$ _____ UNIDOS |
| \$ _____ Fair Housing Center of Greater Madison | \$ _____ Voces de la Frontera |
| \$ _____ FairShare CSA Coalition | \$ _____ Wisconsin Alliance for Women's Health |
| \$ _____ Fair Wisconsin Education Fund | \$ _____ Wisconsin Coalition Against Sexual Assault |
| \$ _____ Freedom, Inc. | \$ _____ Wisconsin Conservation Voices |
| \$ _____ Friends of Wisconsin State Parks | \$ _____ Wisconsin Council of the Blind and Visually Impaired |
| \$ _____ Gathering Waters: Wisconsin's Alliance for Land Trusts | \$ _____ Wisconsin Democracy Campaign |
| \$ _____ GSAFE | \$ _____ Wisconsin Early Childhood Association |
| \$ _____ Kids Forward | \$ _____ Wisconsin Family Ties |
| \$ _____ League of Women Voters of Wisconsin | \$ _____ Wisconsin Literacy |
| \$ _____ Legal Action of Wisconsin | \$ _____ Wisconsin Wetlands Association |
| \$ _____ Madison Area Community Land Trust | \$ _____ Wisconsin Women's Network |
| \$ _____ Madison Audubon Society | \$ _____ Women In Transition |
| \$ _____ Midwest Environmental Advocates | \$ _____ Worker Justice Wisconsin |
| \$ _____ MOSES-WISDOM of Madison | \$ _____ Working Capital for Community Needs |
| \$ _____ Natural Circles of Support | \$ _____ WORT 89.9 FM Community Radio |
| \$ _____ Nuestro Mundo, Inc. | |
| \$ _____ OutReach LGBTQ+ Community Center | |
| \$ _____ Physicians for Social Responsibility Wisconsin | |

All nonprofits receive 100% of contributions directed to them. Gifts to Community Shares of Wisconsin and its member nonprofits are tax deductible as allowed by law.

Neither Community Shares nor its member nonprofits provide goods or services to the donor in return for contributions. Please note: Taxpayers who want to deduct charitable contributions must maintain a record of all gifts in the form of a bank record, canceled check, or a receipt. If you choose payroll contribution, keep for your records copies of a pay stub, W-2 form, or other document from your employer that indicates the amount withheld for charity during the tax year. If you don't receive an acknowledgement/thank you within a month of submitting your pledge form, please contact us at csw@communityshares.com. Thank you!