

PLEDGE FORM

**Yes! I/We would like to make a gift to
Bringing Art to Life: Hill-Stead's 75th Anniversary Campaign.**

CONTACT

Name(s) please print: _____

I/we pledge a total amount of \$ _____ on ____/____/____ (date)

Mailing Address: _____

City _____ State _____ Zip _____ Email: _____

Home Phone _____ Cell Phone _____

Authorized Signature _____

Date _____

PAYMENT: This pledge is to be paid as follows:

TIMING: Payable over a _____ year period (up to three calendar years) beginning on ____/____/____
and ending on ____/____/____

The payment schedule will be ____ Annually ____ Semi-annually ____ Quarterly ____ Monthly

PAYMENT ENCLOSED:

Check (payable to Hill-Stead Museum-see full address on p. 2) Credit Card

Other* (Please contact the Chief Advancement Officer at 860.677.4787 x111 to discuss your payment vehicle)

Credit Card Number: _____ Expiration: _____ Sec: _____

Name as it appears on Card _____

Authorized Signature _____

Please check all of the following that may apply:

- In the unlikely event of my passing before this pledge is fulfilled, my estate will fulfill the pledge agreement (please complete attached Estate Note).
- My employer will match my gift. A matching gift form is enclosed.
- I/We would like to discuss a naming opportunity.
- Please send me/us information about including Hill-Stead in our estate plan.

THANK YOU! Kindly let us know how we can best recognize your generosity by completing the following:

- Please recognize and print this gift in the following way:

_____ (i.e., *Mary and John Smith* or *The Michael and Robert Greene Family Foundation*)

- I/We wish for this gift to remain anonymous.

- I/We wish to have this gift honor or remember:

In honor of _____ In memory of _____

Please send an acknowledgement to:

Name _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

RETURN THIS PLEDGE OR PAYMENT BY MAIL, FAX OR SCAN/EMAIL TO:

Hill-Stead Museum
ATTN: Beth Brett, Chief Advancement Officer
35 Mountain Road
Farmington, CT 06032
860.677.4787 x111
860.677.0174 (fax)
brettb@hillstead.org

***Thank you very much. Hill-Stead Museum is a 501(c) 3 non-profit organization.
Your gift is tax deductible to the fullest extent allowed by law.***

ESTATE NOTE

Gift Intention for Hill-Stead Museum

To my Executor:

1. I / We have made a multi-year charitable gift pledge to the Museum’s 75th Anniversary Campaign in the amount of \$ _____ .
2. It is our intention that we will fulfill this gift during the pledge period outlined in the pledge form (copy attached).
3. In the event this pledge is not fulfilled during our lifetimes, we direct you to complete any unpaid pledge balance amount from the survivors’ estate and make payment to:

Hill-Stead Museum
 ATTN: Beth Brett, Chief Advancement Officer
 35 Mountain Road
 Farmington, CT 06032
 860.677.4787 x111
 860.677.0174 (fax)
 brettb@hillstead.org

4. It is understood that:
 - a. This estate note does not qualify for a charitable income tax deduction.
 - b. Payment made under this estate note may qualify for an estate tax deduction.

Optional – for your consideration:

If our pledge to Hill-Stead’s 75th Anniversary Campaign has been fulfilled during my / our lifetimes, then I direct the Executor to make a charitable bequest to Hill-Stead Museum in the amount of [dollar amount or remainder percentage] _____ for [greatest need or specify purpose] _____ in our names [or the name of a loved one].

Signed _____ Date _____

(If two lives) Signed _____ Date _____

Witnessed by _____

Distribution: Executor / Hill-Stead Museum / personal