

"Creating something innovative that actually changes people's lives requires courage, empathy, curiosity, and community."

Erica Dhawan

SAGINAW COMMUNITY FOUNDATION  
SCF **cornerstone**  
ANNUAL APPEAL



I/we are ready to help our village in Saginaw County

☐ \$1,000 ☐ \$750 ☐ \$500 ☐ \$250 ☐ \$100 ☐ \$50 ☐ Other: \$ \_\_\_\_\_



Gifts above are directed to the Saginaw Community Foundation's operating endowment and qualify you for special recognition at our Cornerstone Reception as a Pillar Society member.

**And/or** direct a gift to **any** endowed fund at Saginaw Community Foundation

Fund name: \_\_\_\_\_

Amount \$: \_\_\_\_\_

For a complete list of endowed funds held at Saginaw Community Foundation, visit [saginawfoundation.org/site/current-funds/](http://saginawfoundation.org/site/current-funds/)

We will gladly accept a gift of stock or other appreciated asset. Please contact Saginaw Community Foundation at (989) 755-0545 for instructions.

## Save a stamp. Donate securely online.

Visit: [saginawfoundation.thankyou4caring.org/cornerstone16](http://saginawfoundation.thankyou4caring.org/cornerstone16)

### PAYMENT

#### Full amount:

☐ Check enclosed (make check payable to Saginaw Community Foundation)

☐ Please charge my credit card: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Card # \_\_\_\_\_ Expiration: \_\_\_\_\_ / \_\_\_\_\_

Cardholder name (please print): \_\_\_\_\_

Billing address: \_\_\_\_\_

Billing City, State, ZIP: \_\_\_\_\_

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

#### Bill me later:

☐ Please bill me \$ \_\_\_\_\_ per month for \_\_\_\_\_ months for a total of \$ \_\_\_\_\_

## Want to multiply your gift?

Many companies have a matching gift program that can double or even triple an employees' personal contribution. Check with your employer to see if a matching program is available.

### ACKNOWLEDGEMENT

☐ Please check here if you **do not** want your name published in our annual report.

(Amounts will never be published)

**Please print your information as you would like it to appear in our annual report. Only names will be published.**

Name(s): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Work phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

Email: \_\_\_\_\_

☐ Please send me information on how I can establish my own fund.

☐ Please send me information on including Saginaw Community Foundation in my estate plan.

**MAIL TO: Saginaw Community Foundation • 1 Tuscola St., Suite 100B • Saginaw, MI 48607**

Some gifts are eligible for a federal income tax deduction and a receipt acknowledging your gift will be provided. Please consult your tax advisor to discuss your personal financial situation.