

Member Letter of Intent

I. This pledge is intended to provide a TOTAL GIFT of \$ _____ to the American Vascular Association's Open the Pathway Campaign in support of research and education.

II. Enclosed find an initial payment of \$ _____ toward this commitment. *Please make checks payable to: American Vascular Association*

The balance of this pledge commitment will be paid according to the following schedule (*check one*):

ANNUALLY, SEMI-ANNUALLY, QUARTERLY, beginning (*date*) _____

Payable over (*check one*): FIVE YEARS OTHER (*please indicate*) _____

Please complete payment schedule chart to ensure reminder notices are sent on time.

Year	1 st Qtr (date & amount)	2 nd Qtr (date & amount)	3 rd Qtr (date & amount)	4 th Qtr (date & amount)
2008				
2009				
2010				
2011				
2012				
2013				

III. Please indicate how you would prefer your name to be listed for donor recognition purposes:

IV. Additional Instructions:

SIGNATURE

DATE

PRINT NAME:

PHONE:

TITLE:

FAX:

EMAIL: