



**Rutland Area Medical  
Community Scholarship**

# Rutland Area Medical Community Scholarship Endowment Fund Gift Agreement Form

Yes, I (we) would like to donate to the 2019 Rutland Area Medical Community Scholarship Endowment Fund in support of scholarships for students pursuing a career in healthcare.

Gift Date: \_\_\_\_\_

## Donor Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Spouse/Partner First: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

## Campaign Gift Information

Campaign Gift Amount \$ \_\_\_\_\_

Gift Type:

- CASH (*checks payable to the Rutland Health Foundation*)
- STOCK (*see reverse for detailed stock instructions*)
- PLEDGE I would like to pledge a total of \$ \_\_\_\_\_

Total Gift	Per Year	Per Quarter	Per Month	Bi-Weekly Deduction

I would like to pledge a total of \$ \_\_\_\_\_

Payroll Deduction Pledge period:  26 weeks (1 yr)  52 weeks (2 yrs)

*(Your bi-weekly payment will be calculated by dividing your total pledge over the pledge period you indicate above.)*



## Flexible Payment Options

CREDIT CARD Please charge my credit card \$ \_\_\_\_\_

American Express  Discover  MasterCard  Visa

Name as it appears on card: \_\_\_\_\_

Billing address is the same as mailing address

Billing address is as follows: \_\_\_\_\_

Account #: \_\_\_\_\_ Expiration date: \_\_\_\_/20\_\_\_\_

Please complete the information below regarding your recognition preferences:

1. Anonymous  Yes  No

2. For recognition in publications: \_\_\_\_\_

## Stock Transfer Instructions

To securely transfer gifts of stock please contact Traci Moore, Director of the Rutland Health Foundation at 802.747.3634 or [tmmoore@rrmc.org](mailto:tmmoore@rrmc.org).

## Donor Agreement

Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_/2019

***Thank you for supporting the  
Rutland Area Medical Community Scholarship Endowment Fund***

For more information, please contact the Rutland Health Foundation, 802.747.3634 or email Traci M. Moore, Director of the Rutland Health Foundation, [tmmoore@rrmc.org](mailto:tmmoore@rrmc.org).