



Jackson County Interfaith Volunteer Caregivers, Inc.

PO Box 354, Black River Falls WI 54615 | Phone 715-284-7058
interfaith@jcivc.org | jcivc.org

Thank you for contributing to Interfaith Volunteer's Capital Campaign. Any donation or pledge is greatly appreciated. You can do a one-time donation, or a pledge for 3 years. All donations will be matched by the Lunda Charitable Fund, until we reach \$800,000.

Once again, thank you for your support.

Donor Name(s) _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Total Amount: _____

Are you eligible for a matching donation from your business or organization? _____

If yes, name of matching donor: _____

PAYMENT INSTRUCTIONS

_____ Check enclosed (payable to Jackson County Interfaith Volunteer Caregivers)

_____ I am fulfilling the entire pledge on or before _____ (reminder will be sent)

_____ I would like to be billed \$ _____ yearly, for the next _____ years.

_____ I will set up autopayment through my credit card or financial institution.

Thank you for committing to the future of Interfaith Volunteers and our community. Interfaith will send out yearly reminders for annual pledge amounts. By signing below, I/we are committing to the following donation/pledge to JCIVC.

Signature _____ Date _____

CONFIRMATION Completed by Interfaith Volunteers

Payment Amount and Date: _____

Payment Amount and Date: _____

Payment Amount and Date: _____

Pledge Completed Date and Staff Signature: _____



Jackson County Interfaith Volunteer Caregivers is a faith-based organization, helping maintain independence and dignity for health impaired older adults, people with disabilities, and people with special needs.

