

Mississippi Valley School Tuition Organization – 2019 Pledge Form

P. O. Box 1597, Davenport, IA 52809

Donor information as you would like it provided on your Iowa Tax Credit Certificate:

Name	Gift Amount
Address	Soc. Sec. No.
City, State, Zip	Phone Number

Please bill me in equal installments in June, September, and December.

Please bill me once in December.

Media Recognition of Contribution

The STO may publicly recognize its donors through annual reports or other means. If you prefer, you may elect to have your name excluded from public disclosures by checking here: _____

Donor's Understanding of Contribution

I understand that no goods or services will be received in full or partial consideration of this gift, and that I may not direct any portion of my donation to the benefit of any specific student(s).

Donor Signature _____ Date _____

To make a onetime gift, please use the gift form below.

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Name	Gift Amount
Address	Soc. Sec. No.
City, State, Zip	Phone Number

If this donation is not being made by an individual, please select business type or estate/trust below:

S Corp C Corp LLC Sole Proprietorship Partnership Estate/Trust

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