



IAMWMW \$50,000 ENDOWMENT DONATION PLEDGE FORM

MEMBERSHIP #	0	0	0			
Enclosed is my gift of	\$					
	I pledge \$ _____ to be paid by (date) _____					
Name						
Mailing Address						
	City		State		Zip Code	
Home Phone						
Cell Phone						
Email						
Region						

PAYMENT OPTIONS

Go to www.iamwmw.org/endowment



Mail - Make Payment Payable to IAMWMW INC.

Dr. Loretta H. Dennis, Financial Secretary
3925 River Bluffs Place
Richmond, Virginia 23223

Email Pledge Forms to:

Dr. Vickie McCreary
vickiep3911@gmail.com

Thank you for your generosity!