

ENDOWMENT CONTRIBUTION COMMITMENT



Oregon Schools
FOUNDATION

5721 Seaman Road
Oregon, Ohio 43616

EIN 34-1691643

DONOR Information

Name(s): _____

Mailing Address: _____

Email #1: _____

Email # 2: _____

Phone(s): (____) _____ (____) _____

How would you like your name(s) to appear in our printed materials: _____

I prefer to keep my/our donation anonymous.

Your OSF Donation

Yes! I/We support the Oregon Schools Foundation in their mission to accept, manage and distribute gifts according to donor designation that enrich, inspire, expand and strengthen educational opportunities for our students.

I/We wish to invest in Oregon Schools Foundation's Endowment Fund that will provide gifts in perpetuity:

Levels of Support:

- Eagle Legacy** **\$50,000**
\$25k/yr over 2 yrs or \$10k over 5/yr
You may Name Your Fund.
- Gold Legacy** **\$25,000**
\$12.5k/yr over 2 yrs or \$5k over 5/yr
You may Name Your Fund.
- Silver Legacy** **\$10,000**
\$5k/yr over 2 yrs or \$2k over 5/yr
- Bronze Legacy** **\$5,000**
\$2.5k/year over 2 yrs or \$1k over 5/yr
- Green Legacy** **\$2,500**
\$1.25k/yr over 2 yrs or \$500 over 5/yr
- OCS Legacy** **\$1,000**
\$500/yr over 2 yrs or \$200 over 5/yr

DESIGNATION

Endowment Fund Growth Investment

The Purpose/Designation of my/our Endowment Gift is to support:

- Academics
- Arts
- Athletics (specific sport?)
- Custom: _____

Proposed Name of your Fund (min. \$25,000):

Subject to review and approval by OSF.

This Endowment Gift is in Memory / Honor of (name or Class): _____
Address for notification: _____

Enclosed is my tax-deductible gift of \$_____. Please mail your donation and this form to:
Oregon Schools Foundation, 5721 Seaman Road, Oregon, Ohio 43616

Please indicate if you are a graduate of Clay High School; and if so, the year of graduation:

Alumni; Year _____ Attended Oregon City Schools; grades _____

If not an Alumni, please indicate your relationship or affiliation: _____

