Donor Name(s)			Special Instructions:
Address			
City	State	Zip	
Phone	Email		
My total gift/pledge is \$ _	to support	the Beit	t Am New Building, payable as follows:
☐ GIFT			PLEDGE
One-time payment for enclosed. I wish to make my paymer	nts by		I am making an initial payment of \$ After that I will pay \$ every □ month □ quarter □ year beginning on (mm/dd/yy) ending on (mm/dd/yy) ansfer* *we will contact you with instructions
Signature		– — Się	gnature
	☐ in memory of ble in the U.S. Please emo line. Send to: Be	make ch it Am, P	hecks payable to "Beit Am" and write 2.O. Box 1143, Corvallis OR 97339-1143

Julie & Tony Pappas Beit Am New Building Fundraising Co-Chairs

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