

Pledge Card



Donor Information

Name: _____

Company (if applicable): _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Naming Opportunities

I/We would like information regarding naming opportunities.

Signature

Signature: _____

Date: _____

THE BOUNTIFUL SOURCE OF HOPE

My Commitment

I/We are pleased to support the Wellspring Capital Campaign with a total pledge of:

\$ _____

Pledge Schedule

1 year _____ 2 years _____

3 years _____ 4 years _____

5 years _____

Payment Method

Check Enclosed Send Invoice

Online Payment Other: _____

Please return pledge card in the provided envelope to Wellspring.

Wellspring Interfaith Social Services | 1316 Broadway, Fort Wayne, IN 46802

www.wellspringinterfaith.org | 260-422-6618 x112 | ermina@wellspringinterfaith.org

GIVING LEVELS

Legacy Builder — \$1,000,000+

Creates lasting impact for thousands of families and children.

Hope Champion — \$500,000+

Expands access to critical services and programming.

Community Partner — \$250,000+

Strengthens family stability and prevents homelessness.

Nourish Our Community — \$100,000+

Provides the foundation for food security.

Opportunity Sponsor — \$50,000+

Provides resources that help children and families thrive.

Brighter Future Partner — \$10,000+

Helps build a stronger future for our community.

Seeds of Hope — \$5,000+

Plants possibilities for families in Allen County.

Future Builder — \$1,000+

Helps us build a better tomorrow.

Together, we can build hope and stability.