



A Drop in the Bucket Campaign Pledge Form

Name/Business/Organization _____

Mailing Address _____

Email Address _____

Preferred Method of Contact for Updates and News (Circle One) *email* *mail*

We promise not to share your contact information with anyone else but would like to keep you up to date with happenings at the food pantry.

Pledge Amount (Please check one)

_____ I pledge \$10 a month for 12 months to the Maxfield Community Food Pantry.

_____ I prefer to give a one time gift of \$120 so I don't have to think about sending a check each month.

_____ I would like to support the food pantry with a larger pledge of _____
or a one time gift of _____.

Please complete this form and include your pledge amount. Checks should be made out to Maxfield Community Food Pantry. Please place the word "Pledge" on the memo line.

Pledges may be mailed to:

**Maxfield Community Food Pantry, P.O. Box 490, Lake Luzerne, New York 12846
or dropped off at the Pantry during operating hours.**

Thank you so much for your support!