

5224GOOD

New Member Form

*A Learning and
Giving Circle for
Johnson County*

Executive Committee

Maggie Elliott
Anne Vandenberg
Thais Winkleblack
Denise Rehmke
Cathy Pugh
Sheila Boyd
Ann Donahue
Laurie Zaiger
Mary Westbrook

Tax Deductible

Gifts are tax-deductible
and may qualify for a
25% Endow Iowa tax
credit.

Match Opportunity

If your gift will be
matched by your
company/family/other,
please send match
form to the address
below.

Additional Gifts

Please make checks,
corporate matches, or
other gifts payable to:

*The Community
Foundation of
Johnson County*
501 12th Ave. Suite 102
Coralville, Iowa 52241

Include "5224GOOD
Fund" in the memo.

Pledge

I agree to pay a total of \$ _____ to 5224GOOD.

- \$250 Charitable Giving Fund/Membership (required)
 Endowment Fund Donation \$ _____

Please consider contributing any amount to the Endowment Fund. Each year, 5% of the Endowment Fund is added to the amount 5224GOOD grants. A contribution to the Endowment Fund helps 5224GOOD make grants every year.. forever!

Member Information

Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

- By checking this box you agree to receive text message meeting reminders

Signature: _____ Date: _____

Dues Payment Options

Please indicate which payment method you would like to use below and follow the instructions for that section.

Check

Please mail check made payable to *The Community Foundation of Johnson County*, with "5224GOOD Membership" in the memo line, to 501 12th Ave. Suite 102, Coralville, Iowa 52241.

Credit Card

Please visit www.cfjc.org/giving/5224good to make a credit card payment online or call (319) 337-0483.

- Quarterly Installments (Only available via credit card)
Call (319) 337-0483 to set up quarterly installments.

Automatic Deduction from Checking Account

Please fill out the authorization below and include a voided check.

Bank Routing Number: _____ Account Number: _____

*I authorize the Community Foundation of Johnson County to debit my
checking account on a recurring basis for the amount stated above.*

Authorized Signature: _____