



USS San Francisco Memorial Foundation
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To Support the development of the USS San Francisco Memorial Foundation we pledge as an unrestricted gift.

\$1000 ___ \$500 ___ \$250 ___ \$100 ___

Pledges of more than \$100 may be remitted in installments. **All checks must be in US Dollars and drawn on a US Bank.**

___ Check for full pledge amount is enclosed.

___ This pledge will be fulfilled by paying \$_____ per year for _____ years (up to 5). My check for the first installment is enclosed.

Personal Info:

| | |
|--------------------|--|
| Name (Last, First) | |
| Company | |
| Address | |
| City, State, Zip | |
| Country | |
| Phone | |
| Fax | |

Payment Info: Visa Master Card Discover Card

| | |
|----------------------------------|--|
| Name on Card (Last, First M.) | |
| Credit Card Number | |
| Expiration Date | |
| Membership Amount (\$38.00) | |
| Donation Amount | |
| Total Amount | |

Signature: _____