



LAND OF LINCOLN HONOR FLIGHT
SPRINGFIELD, ILLINOIS

PLEDGE FORM

(PLEASE PRINT OR TYPE)

NAME	
BILLING ADDRESS	
CITY	
STATE	
ZIP CODE	
TELEPHONE (HOME)	
TELEPHONE (BUSINESS)	
FAX	
E-MAIL	

PLEDGE INFORMATION

I (WE) PLEDGE A TOTAL OF \$_____ TO BE PAID:
 ___ NOW ___ MONTHLY ___ QUARTERLY ___ YEARLY.

I (WE) PLAN TO MAKE THIS CONTRIBUTION IN THE FORM OF:
 ___ CASH ___ CHECK ___ OTHER.

GIFT WILL BE MATCHED BY _____ (COMPANY/FAMILY/FOUNDATION).
 ___ FORM ENCLOSED ___ FORM WILL BE FORWARDED

ACKNOWLEDGEMENT INFORMATION

PLEASE USE THE FOLLOWING NAME(S) IN ALL ACKNOWLEDGEMENTS:

___ I (WE) WISH TO HAVE OUR GIFT REMAIN ANONYMOUS.

SIGNATURE(S)
DATE

PLEASE MAKE CHECKS, CORPORATE MATCHES, OR OTHER GIFTS PAYABLE TO:

LAND OF LINCOLN HONOR FLIGHT

MAIL TO:

LAND OF LINCOLN HONOR FLIGHT
 P.O. BOX 403
 CHATHAM, IL 62629

OUR MISSION IS TO PROVIDE ROUND TRIP TRANSPORTATION AND ACCOMMODATIONS FROM ABRAHAM LINCOLN CAPITAL AIRPORT IN SPRINGFIELD, ILLINOIS FOR ANY WORLD WAR II VETERAN WHO WISHES TO VISIT THE WORLD WAR II MEMORIAL AND OTHER MEMORIALS IN WASHINGTON, D.C. THIS DAY TRIP IS PROVIDED COMPLETELY FREE OF CHARGE TO THE VETERAN IN HONOR OF HIS/HER SERVICE.