



**KANSAS**  
**FFA FOUNDATION**  
 110 Umberger Hall  
 Manhattan, KS 66506

## LETTER OF INTENT

In recognition and support for the programs and services provided by the Kansas FFA Foundation, I/we would like to make the following gift/pledge of: \$ \_\_\_\_\_

### **Donor Information/Recognition:**

Please indicate how you would like your KS FFA donation recognized: (such as, John & Susan Olson, Olson Family, Business Name, ABC Club, Anonymous): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**\*All donors, except for anonymous donations, are recognized through giving clubs or sponsorships, *not* specific amounts.**

I/we wish for our donation to be anonymous in donor recognition listings and other publications.

In Memory/Honor Indications (if any):  In Memory or  In Honor

Name: \_\_\_\_\_

### **Gift Details:**

#### ***OPTION 1: Pledge***

attached is \$ \_\_\_\_\_ the balance of \$ \_\_\_\_\_ will be paid in increments of \$ \_\_\_\_\_

over the next  2  3  4  5 years  or other \_\_\_\_\_

starting on (date) \_\_\_\_\_, 20\_\_\_\_  
(month) (year)

of which the payments will be made:  Annually  Semi-Annually  Quarterly  Monthly  
*as a convenience to our donors, a pledge reminder will be sent prior to your payment date(s)*

I would like my payments made using Automated Clearing House (ACH) (complete information below)

**Automatic Transfer of Funds (ACH):** I/we authorize the Kansas FFA Foundation to charge the amount and frequency indicated in Option 1 to my/our checking/savings account, until further notice.

Please deduct from:  Checking or  Savings (enclose blank void check/deposit slip)

From this Financial Institution: \_\_\_\_\_

Institution Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**GIFT DETAILS CONTINUED ON BACK**

**OPTION 2: One Time Cash Payment**

The full amount is enclosed by:  check/cash or  credit card *(a staff members will contact you for card details)*

**OPTION 3: Planned Giving/Other**

Describe planned giving below:

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(The Kansas FFA Foundation Office will be contacting you for further documentation of your gift)

**Signature of Intent:** (All donors must sign to verify letter of intent)

_____ (Signature Donor A)	_____ (Signature Donor B)
_____ (Print Name Donor A)	_____ (Print Name Donor B)
_____ (Date)	_____ (Date)

**Note:** This is a declaration of intention and may be increased, decreased or cancelled at the option of the donor. Contact the Kansas FFA Foundation for questions or additional information.

*Gift and pledge payments should be made payable to: Kansas FFA Foundation*

***Thank You!!***

**Kansas FFA Foundation**

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