

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

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

City, State Zip: \_\_\_\_\_

YES! I/we would like to contribute to the **2018-2019 Annual Giving Campaign.**

\$ \_\_\_\_\_

**Contribution made by (check one):**

Direct debit (ACH) or credit card on file for 2018-2019 tuition payments

Check (made payable to Near North Montessori School)

Credit Card:  Visa  MasterCard  Discover  Amex

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

Make your gift online at [NNMS.org/donate/agg](http://NNMS.org/donate/agg)

At this time, I/we would also like to make my/our gift/pledge to the **Teacher/Staff Appreciation Drive** of: \$ \_\_\_\_\_  
(Suggested donation of \$350. School-wide request to be sent in May.)

**Gifts can be pledged now and paid over the course of the school year. I/we wish to fulfill our pledge in (check one):**

One Payment on \_\_\_\_\_  
(Date must be by July 31, 2019)

Three Payment Plan  
(February 16, 2019; April 20, 2019; May 11, 2019)

Five Payment Plan  
(Feb 16, 2019; Apr 20, 2019; May 11, 2019; June 15, 2019; July 20, 2019)

Please tell us how you would like to be recognized:

\_\_\_\_\_

\_\_\_\_\_

For further information, to give by phone, or make a gift of stock, contact Sarah Cutrara, Advancement Director, at (773) 269-6239

In addition to my personal commitment, my employer, \_\_\_\_\_ will match my gift. I will notify my employer of my payment and forward my company's matching gift form to NNM's Advancement Office.

Your contribution is tax deductible to the extent allowed by law and sincerely appreciated.

# MONTESSOARING

MARI FRAN SCHECHTMAN, ANNUAL GIVING CAMPAIGN COMMITTEE CHAIR | MARY BEYER | BAILEY CLOUDMAN | GARY CLOUDMAN | COLLEEN CURRAN | KAREN DAUGHERTY | SHARI DORFMAN | SHUBHRA JAIN  
ARIEL LITVIN | MYA POWELL | VICKY SALUD | JEANNETTE SCHAR | MARA SCHMIDT | MARY PAT WOOD | MARIA XEROGIANES | MATT ZWEIFEL