



**CAMPAIGN FOR**  
**SAVING LIVES**  
**SAVING FAMILIES**  
**SAVING OUR COMMUNITY**

I/We support the SSTAR Saving Lives Capital Campaign with a gift of: \_\_\_\_\_

Given By \_\_\_\_\_

As you would like your name to appear for recognition purposes

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

**GIVING LEVELS**

- Honorary Founder \$100,000+
- President's Club \$50,000-\$99,999
- Benefactor \$10,000-\$49,000
- Patron \$1,000-\$9,999

Billing Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

**PAYMENT INFORMATION**

Please charge my gift to:  Visa  Mastercard  AmEx

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEDGE CARD**

**Make checks to:**

SSTAR Saving Lives Campaign  
386 Stanley Street Fall River, Ma. 02720  
508.324.3500  
www.sstar.org

Total Gift \$ \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

Balance \$ \_\_\_\_\_

Balanced to be billed:

- Monthly  Quarterly  Semi Annually
- Annually  Other

Balance to be paid over \_\_\_\_\_ years,  
beginning \_\_\_\_\_ 201 \_\_\_\_\_

- Please send me stock transfer option
- Yes, I'm interested in naming opportunity
- This gift is in memory of:

\_\_\_\_\_

- This gift is in honor of:

\_\_\_\_\_

- Enclosed is a check payable to:  
SSTAR Saving Lives Campaign  
Gifts are tax-deductible to the fullest extent  
allowed by law.