



2011 "BUSHELS FOR CARE" PLEDGE FORM

"From This Land Grows a Gift"
OSF Holy Family Foundation

In support of the "Bushels for Care" campaign for the OSF Holy Family Foundation, I / We wish to gift by donating bushels of grain.

Donor Information (PLEASE PRINT)

Name _____ Address _____

City _____ State _____ ZIP Code _____

Telephone _____ E-Mail _____

Pledge Information

I (we) pledge a total of _____ (NUMBER OF BUSHELS) bushels of _____ (CROP NAME-E.G., SOYBEANS, CORN)

Name of Grain Elevator you will be utilizing for the "Bushels for Care" Program

Is gift of grain a memorial? Yes No

If "Yes": In Memory of _____ In Honor of _____

Benefit Preference: Diabetic Education Program - \$10,000 Nursing Scholarship - \$3000

No Preference

I (we) wish to have our gift remain anonymous. Yes No

SIGNATURE(S)

DATE

IMPORTANT POINTS TO CONSIDER:

- GIFTING (CHANGE OF OWNERSHIP) OCCURS BEFORE THE COMMODITY IS SOLD.
- THE DONOR SHALL NOT SELL THE COMMODITY OR OTHERWISE PROVIDE INSTRUCTIONS OF THE SALE OF THE COMMODITY.

TAX INFORMATION

THE OSF HOLY FAMILY FOUNDATION IS A TAX-EXEMPT PUBLIC CHARITY UNDER INTERNAL REVENUE CODE SECTION 501(c)(3).

IN ALL CASES, PLEASE CONTACT YOUR TAX ADVISOR FOR COMPLETE LEGAL AND/OR TAX ADVICE REGARDING CHARITABLE DONATIONS.

MAIL PLEDGE FORM TO

OSF HOLY FAMILY FOUNDATION AT 1000 WEST HARLEM AVENUE, MONMOUTH, ILLINOIS, 61462