

Letter of Intent

I/We wish to make a gift to the AGA Research Foundation to support its goals and objectives. I/We commit the following:

Total amount of gift: **Initial payment:**

Balance: **Date of first payment:**

I prefer the following schedule of payments:

(Check the desired schedule and indicate number of years, up to five from pledge date.)

☐ Annually ☐ Semi-Annually ☐ Quarterly ☐ Other For number of years.

As a service to our donors, the AGA Research Foundation will send pledge reminder notices unless noted otherwise below.

Please: ☐ Send pledge reminders beginning on: ☐ Do not send reminders.

Donations to the AGA Research Foundation support the AGA Research Awards Program offering grants to investigators. All donations are made to the AGA Research Foundation endowment. Your gift will be used for:

I/We intend to apply for matching funds from:
(Corporation)

☐ Please use matching funds to increase my personal pledge amount for recognition purposes.

This is how I/we would like my/our name(s) listed in donor recognition:

(Please Print)

Donor Information:

Name(s)

Address

City State Zip

Telephone Fax

Signature(s) Date / /

Gifts are tax deductible to the fullest extent provided by law. If you wish to make a gift using a credit card, electronic fund transfer (EFT) or stock, please call the foundation office at **301-654-2055**.

Please provide your completed form via one of the following:

AGA Research Foundation

4930 Del Ray Ave.

Bethesda, MD 20814

Email: **foundation@gastro.org**

Checks should be made payable to AGA Research Foundation.

The AGA Research Foundation is an IRS 501(C)(3) tax-exempt organization.

To learn how you can support GI research, go to **foundation.gastro.org**.