



Raising the Bar Endowment Campaign

I wish to pledge:

_____ \$5,000	_____ \$10,000
_____ \$25,000	_____ \$50,000
_____ \$100,000	_____ \$250,000
_____ \$500,000	_____ \$1,000,000
_____ Other	

Payable:

_____ One Payment	_____ 3 Years*
_____ 5 Years*	_____ Transfer of Stock

**Please send an annual pledge statement.*

Name: _____

Address: _____

Payment Type:

___ Enclosed is my check payable to Louisiana Bar Foundation.

___ Please charge my credit card in the amount of \$ _____.
Circle one: MC Visa AmEx

Card #: _____

Exp. Date: _____

Cardholder's Signature: _____

Date: _____

Return to:
Louisiana Bar Foundation
601 St. Charles Ave., New Orleans, La. 70130

504.561.1046 fax 504.566.1926
www.raisingthebar.org