



ASAE Research Foundation Leadership Society Form

Name: _____

Title: _____

Organization: _____

Preferred Address: _____

City/State/Zip Code: _____

Business Phone: _____

Cell Phone: _____

Home Phone: _____

How would you like to be listed? (If you would like to be anonymous, please write Anonymous)

Donors will be recognized in campaign materials unless an anonymous listing is requested.

This gift is:

- Anonymou s Personal Organizational/Corporate Combination
- In Honor of _____
- In Memory of _____

Birthd ay: _____

Photo: *(Please attach/send a photo of yourself)*

Leadership Society Agreement:

Yes, I support the work of the ASAE Research Foundation and would like to make a gift of \$25,000 or more to ASAE Research Foundation’s Annual Fund. Leadership Society committments must be fulfilled in 8 years or less.

- Emerald - \$25,000 - \$49,999
- Ruby - \$50,000 - \$74,999
- Sapphire - \$75,000 - \$99,999
- Diamond - \$100,000+

My current intent is to give the ASAE Research Foundation a gift of \$ _____, to be paid in full by the end of calendar year _____

Signature: _____ Date: _____

Please choose one of the following payment options:

I will give ___ Monthly* ___ Quarterly ___ Annually. Please send reminders beginning on _____ and thereafter.

*monthly gifts are automated via credit card

Thank you for your generous support of ASAE Research Foundation!