



Contribution/Pledge Form

I/We want to support the work of the Social Justice Fund to find solutions to the chronic problems of our society.

\$10,000 and up	Change Maker
\$4,500	Community Builder
\$2,250	Community Leader
\$1,000	Advocate
\$500	Member
\$ Up to \$500	Supporter

- My/Our contribution for this year is \$ _____
- Enclosed is my check for \$ _____
- See reverse for my credit card information

Make a 3-Year Commitment

I/WE want to be a Social Justice Visionary and make a three year commitment (a minimum of \$500 per year) to support the building of the Social Justice Fund and to help to meet the James Irvine Challenge grant to build an endowment that will support the sustainability and capacity building of the Social Justice Fund by contributing (or pledging to contribute) over the next three years:

- I pledge to make the following annual investment to the Social Justice Fund over the next 3 years.
 - \$ _____ by December 31, 2008
 - \$ _____ by December 31, 2009
 - \$ _____ by December 31, 2010

Signature _____ **Date** _____

Although gifts of all sizes are welcomed and deeply appreciated, individual donors who contribute \$500 or more have the option of participating in the Giving Circle's annual education and grantmaking program. Initial payment of \$100 must be received by December 31 of each year and pledge paid in full by April 1 of the next year.

CREATING CHANGE NOT CHARITY
1317 Del Norte Road, Ste. 150 Camarillo, CA 93010
<http://www.vccf.org/sojust.html>

Over

Your Information

Name(s): _____ (As you would like it to appear in acknowledgements of SJF donors)

Please do not publish my/our names

Organizational Affiliation: _____

Address: _____

City: _____ State: _____

Zip: _____ Phone: _____

Fax: _____ Email: _____

Note to Donors:

Thank you for giving us your contact information. All information will be kept confidential by the Social Justice Fund and VCCF, except for publication of your name as noted above.

My employer has a matching gifts program. Please contact me for more information.

For Credit Card Payments

I/we prefer to pay by credit card. Please charge \$_____ to the following card (Visa and MasterCard only):

Visa

MasterCard

Card Number: _____

Expiration Data: _____

Last three digits on back of card: _____

Name as it appears on card: _____

Charge the amount:

All at once.

Monthly amount: \$_____ Beginning: _____ Ending: _____

Annual amount: \$_____ Beginning: _____ Ending: _____

Return Contribution/Pledge Form to:

Social Justice Fund for Ventura County
1317 Del Norte Road, Suite 150, Camarillo, CA 93010