

Alpha Chi Rho Educational Foundation, Inc.  
 "Once an Alpha Chi Rho Man, Always an Alpha Chi Rho Man"  
 Annual Brotherhood Fund Appeal

Name \_\_\_\_\_ Chapter \_\_\_\_\_ Grad Yr. \_\_\_\_\_ 2012GW

I would like to make my 2012 pledge as follows:

<u>Pledge</u>	<u>10 Monthly Payments</u>
<input type="checkbox"/> \$193	\$19.30
<input type="checkbox"/> \$150	\$15.00
<input type="checkbox"/> \$75	\$7.50
<input type="checkbox"/> <b>Other</b> _____	

- Payment in full by check**
- Monthly statements**
- Credit Card**
- I've set up re-occurring payments thru on-line banking**

Please make checks payable to AXPEF, Inc.

My Gift is: \$ \_\_\_\_\_  
 I Have Enclosed: \$ \_\_\_\_\_  
 My Balance is: \$ \_\_\_\_\_

Pay using your credit card online: [www.alphachirho.org/donations](http://www.alphachirho.org/donations) or complete the following information.

Visa  MasterCard  AMEX  Discover

Name on Card \_\_\_\_\_  
 Credit Card # \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_  
 Amount to Be Charged \_\_\_\_\_ each month.  
 Beginning Date \_\_\_\_\_ and Ending Date \_\_\_\_\_

You may pay online at [www.alphachirho.org/donation](http://www.alphachirho.org/donation)

Alpha Chi Rho Educational Foundation, Inc.  
 "Once an Alpha Chi Rho Man, Always an Alpha Chi Rho Man"  
 Annual Brotherhood Fund Appeal

Name \_\_\_\_\_ Chapter \_\_\_\_\_ Grad Yr. \_\_\_\_\_ 2012GW

I would like to make my 2012 pledge as follows:

<u>Pledge</u>	<u>10 Monthly Payments</u>
<input type="checkbox"/> \$193	\$19.30
<input type="checkbox"/> \$150	\$15.00
<input type="checkbox"/> \$75	\$7.50
<input type="checkbox"/> <b>Other</b> _____	

- Payment in full by check**
- Monthly statements**
- Credit Card**
- I've set up re-occurring payments thru on-line banking**

Please make checks payable to AXPEF, Inc.

My Gift is: \$ \_\_\_\_\_  
 I Have Enclosed: \$ \_\_\_\_\_  
 My Balance is: \$ \_\_\_\_\_

Pay using your credit card online: [www.alphachirho.org/donations](http://www.alphachirho.org/donations) or complete the following information.

Visa  MasterCard  AMEX  Discover

Name on Card \_\_\_\_\_  
 Credit Card # \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_  
 Amount to Be Charged \_\_\_\_\_ each month.  
 Beginning Date \_\_\_\_\_ and Ending Date \_\_\_\_\_

You may pay online at [www.alphachirho.org/donation](http://www.alphachirho.org/donation)