

Company/Organization Name _____

Contact Name _____

Street Address _____

City, State, Zip _____

Phone _____ E-mail _____

Web Address _____

Donor(s)

I/We wish to contribute to the Christian County CEO Program as follows:

Investor \$1,000 annually for three years (\$3,000) total**Contributor** One-time gift of \$ _____**Payment Method** My check for the entire pledge is enclosed Please bill me My check for the first of three annual payments is enclosed
(please send me an annual reminder)**Acknowledgements**

I/We would like our name/company name to be listed in the acknowledgements:

 I/We wish to remain anonymous

Please make checks payable to **Christian County CEO, Inc.** for the benefit of the Christian County CEO Program. Christian County CEO, Inc. is a 501(c)(3) not-for-profit organization. Donations are tax deductible to the extent allowed by law.

Signature_____
Date**Participant(s)**

I/We would like to be considered for: (check all that apply)

 Hosting a CEO class Having a CEO class visit my organization Speaking at a CEO class Mentoring a CEO student**Return this form to:**CEO c/o Robert Steiner, CPA
911 W. Spresser St.
Taylorville, IL. 62568email:
rsteiner@chipsnet.com