



DANIEL STOWE BOTANICAL GARDEN TRIBUTE PROGRAM

Donor(s) Name: _____

Address: _____

Email: _____

Phone: _____

In support of ***Daniel Stowe Botanical Garden***, I/We intend to make a gift of
\$ 10,000 to commemorate

Wording I/We would like on the bench plaque:

Gifts to the Tribute Program

I/We plan to fulfill this commitment by making gifts according to the following schedule:

___ Annual Payments: Five annual payments in the amount of \$2,000 each beginning
_____ and continuing each year until _____ or until paid in full, if earlier
than the specified five years.

OR

___ A lump sum payment, check enclosed or call w/credit card information

Printed Name

Printed Name

Signature

Signature

Date: _____

**Thank you for helping to preserve, maintain and enhance one of our
Region's treasures!**