



NAGARATHAR SANGAM OF NORTH AMERICA INC

23 Keith Ct., Kendall Park, NJ 08824, USA

www.achi.org

Registered office: 29 Periwinkle Drive, Monmouth Jct, NJ 08852-1909

PLEDGE FORM

Donor Information (please print or type)

Name	
Address Line 1	
Address Line 2	
City	
State	
Zip Code	
Country	
Telephone (Home)	
Telephone (Cell)	
E-Mail	

Pledge Information

I (we) pledge a total of \$ _____ to be paid:
___ now ___ monthly ___ quarterly ___ yearly.

I (we) plan to make this contribution in the form of:
___ cash ___ check ___ credit card ___ other.

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

Gift will be matched by _____ (company/family/foundation).
___ form enclosed ___ form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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___ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

NSNA (Annamalai Sambanthan)
47 Brock Lane
Hackettstown NJ 07840