Payment in full	BEYOND THE BOOKS EDUCATIONAL FO	OUNDATION - CONTRIBUTION & PLEDGE CARD
Payment in annual installments (Max of 3) # payments of \$ in (Month)	Name Print name(s) as for recognition:	PhoneOr Anonymous
Amount enclosed \$ If paying by Credit Card:	Street_	
Check Card Type:Visa;Discover;Master Card;AMEX		State Zip Memory of
Name on Card:	OrIn Honor of	for (Occasion)
Billing Address	Name & address to send notification for Memory/Honor gifts:	
Card No: Exp. Date (mm/yy)	THE BOOKS and District 87 public schools. You	novative educational enrichment programs for students in Unit 5 ur contribution is tax-deductible to the extent provided by law. has a matching gift program (enclose form).
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