



# Capital Campaign Pledge Form

**Thank you for your commitment to Our House and the families we serve. Help us deepen our impact through investments in our programs and facilities.**

Full Name(s) \_\_\_\_\_

\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

## Pledge Information

I/We pledge a total of \$ \_\_\_\_\_ to support the Next Level, Deeper Impact, New Heights Campaign to be paid on or before June 30, 2024.

| <b>2022</b> | <b>2023</b> | <b>2024</b> |
|-------------|-------------|-------------|
| \$ _____    | \$ _____    | \$ _____    |

**Return form to Diane Douglass at Our House, 173 Boulevard NE  
Atlanta GA 30312 or via email at [ddouglass@ourhousega.org](mailto:ddouglass@ourhousega.org).**