

Donor Information (PLEASE PRINT CLEARLY)				Gift Information	
LAST NAME		FIRST NAME		TOTAL GIFT:	
LAST NAME (2 ND F	PERSON)	FIRST NAME (2 ND PERSON))	GIFT TIMING or PLEDGE	
STREET ADDRESS	5	APT		This is a one-time gift, payable by check, stocks/wire, credit.	
CITY		STATE ZIP		☐ I wish to make this one-time gift a pledge	
EMAIL		TELEPHONE		I wish to make this pledge as follows:	
NAME(S) AS YOU	WISH TO BE RECOGNIZED WISH TO BE RECOGNIZED O REMAIN ANONYMOUS			\$ENCLOSED GIFT I will pay the remainder over: 1 YR 2 YR 3 YR OTHER Stocks/Wire Transfers/Other: To discuss your gift or pledge and ways to donate, contact ira@iradeutchman.com	
Payment	CHECK: Enclosed is my gift of \$ CREDIT: Please charge \$				
NAME ON CREDIT	CARD (PLEASE PRINT CLEARLY)			ne gifts can be made at cinema.org/donate	
ACCOUNT NUMB	<u>ira</u>		<u>ira@</u>	form may be sent to biradeutchman.com or to S Cinema Center Inc.	
SIGNATURE				West End Avenue, 4A,	

IRA Distributions: Are you 72 or older and taking a Required Minimum Distribution from your IRA? Consider this tax-free option when making an end-of-year gift to Upper West Side Cinema Center Inc.

New York, NY 10024