

## **Charitable Gift Letter of Intent**

	one City Schools, Inc. fundraising ca	impaign, we are pleased to advise you of our
Our gift is to be used	by One City Schools, Inc. as indica	ted below:
\$is determined by the o	_	d in the most efficient and beneficial way, as
OR		
s to be restricted to the objective(s) described below:		
		rs (not to exceed three years). We have given an initial nade on the following dates and amounts.
		Amount:
Date:	Date:	Date:
	d that the amount of our gift will no y publish our names among those o	ot be publicized externally without our permission, One of other campaign donors.
We and One City Sch gift.	ools, Inc. will reach a mutually sat	isfactory agreement as to the recognition of this
Signature:		
Printed Name:		
Address:		
Phone:	Date	
Please complet	e this form and email or r	nail it to:
	One Cit	v Schools

2012 Fisher Street Madison, WI 53713

Phone: 608.268.8004

Email: Gail Wiseman, <a href="mailto:gwiseman@onecityschools.org">gwiseman@onecityschools.org</a>

- ☐ I would like to host an in-person or virtual fundraiser for One City Schools.
- ☐ Please use my name in your endorsements.
- ☐ I would like to help in other ways, too. Please contact me directly.

One City Schools, Inc., 2012 Fisher Street, Madison, WI 53713, Phone: (608) 268-8004 A 501(c)(3) tax exempt organization (FEIN: 47-1490574 and Wisconsin CES: 065230)