

## Charitable Donation Form and Pledge Agreement

Charities Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone# \_\_\_\_\_

Fax# \_\_\_\_\_

Website \_\_\_\_\_

Donation Amount \$ \_\_\_\_\_

Credit Card Info: Name on credit card \_\_\_\_\_ Expiration date \_\_\_\_\_

Circle Type: MC Visa Discover Amex 16 Digit \_\_\_\_\_ 3 Digit Pin \_\_\_\_\_

### Pledge Agreement

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

You're Name \_\_\_\_\_

Address \_\_\_\_\_

City and State \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Social Security # \_\_\_\_\_

Pledge Amount \$ \_\_\_\_\_

Due Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

### Promissory Note

Note Amount \$ \_\_\_\_\_ Today's Date \_\_\_\_\_

I understand this Agreement is legal and a promise to pay to the bearer on the face of this Promissory Note, the Sum Of \$ \_\_\_\_\_ (in Legal US funds) with no Interest. Should I not pay by the demand date, I agree that Interest May be charged at a rate of 15% APR from the original date of this Promissory Note. I being under no mental or Physical duress do enter this agreement willingly without the institution of legal proceeding.

Demand Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Borrowers Name \_\_\_\_\_

Borrowers Signature \_\_\_\_\_

Bearer \_\_\_\_\_

Free Educational Software!

No Excuse For Child Abuse in America .com



*Community Partner Since 2009*

## Goldie's Secret donated "In the Name" of My Community Partners!

I am donating my "Goldie's Secret" child abuse prevention programs to non profits, schools and government agencies. The donation receipts provided from these non-cash charitable contributions will be "In the Name" of my community partners and will total \$4800.00 for sixteen donated programs.

These gifts of my "Goldie's Secret" Child Abuse Prevention Programs "In the Name" of my community partners will provide my partners \$720.00 up to \$2400.00 or more in personal income tax advantages.

My community partners are receiving this benefit in appreciation for their financial support to charitable organizations, philanthropic programs and investments that benefit their communities.

Donate \$840 Up To \$4800 To Our Special Non-Profit Partners And You Will Receive 100% of Your Money-Back!

Requirements for community partners to benefit from my Goldie's Secret program donation in their name.

- #1. You must be an American citizen or legal US resident to benefit from "Donation in Your Name".
- #2. Current taxpayers that itemize personal income tax deductions and file 1040 federal long form.
- #3. You've contributed or pledge to contribute to charity, a philanthropic or community investment.

Receive tax advantages as tax refund, on your payroll checks, or quarterly if you estimate taxes.

- #1. Adjust your W-4 income tax form at your work place. Add additional allowances to receive your tax advantages paid through your payroll checks. Employer must change your W-4 within 30 days.
- #2. If you pay estimated taxes, adjust by adding more allowances for your charitable tax deduction.
- #3. Give all your charitable donation receipts, the video appraisal and comparable video guide to a licensed income tax professional, for your tax advantage or a year-end personal income tax refund.

Note: Add maximum allowances to your W-4 for 1 or 2 months to receive your full cash benefit fast!

Please visit me online at

<http://www.noexcuseforchildabuseinamerica.com/mycommunitypartners.html>

Please email your questions to [max@noexcuseforchildabuse.com](mailto:max@noexcuseforchildabuse.com) or telephone me at #760.464.8941

We encourage everyone to consult their CPA, Tax Planner or Tax Attorney, Investment Advisor or Certified Financial Planner for questions concerning the validity of this opportunity being offered.

## Donate To A Charity and Receive 100% of Your Money-Back!

I will donate \$4800 in Goldie's Secret child abuse prevention programs to charity "In Your Name"  
When you pledge to contribute your free one-time tax advantage to our special charity partner.

Cash Donation	Software Donation	Deductions	Personal Tax Rate	Tax Advantage	Your Cost
\$4800	+	\$4800 =	\$9600	x 50%	= \$4800 \$0
\$3800	+	\$4800 =	\$8600	x 45%	= \$3870 \$0
\$3200	+	\$4800 =	\$8000	x 40%	= \$3200 \$0
\$2580	+	\$4800 =	\$7380	x 35%	= \$2583 \$0
\$2050	+	\$4800 =	\$6850	x 30%	= \$2055 \$0
\$1600	+	\$4800 =	\$6400	x 25%	= \$1600 \$0
\$1200	+	\$4800 =	\$6000	x 20%	= \$1200 \$0
\$840	+	\$4800 =	\$5640	x 15%	= \$846 \$0

## 100% Money-Back Charitable Giving Worksheet

Choose One:  One-Time Cash Donation  Planned Giving Jan thru Dec  Start Giving Now

Your Name \_\_\_\_\_ Date \_\_\_\_\_

Choose your tax rate \_\_\_\_\_% + the cash donation amount \$ \_\_\_\_\_ + Deductions \$ \_\_\_\_\_

**Planned Giving: Change W-4 tax form at work. Add additional allowances as shown in this example**

\$7380 Deductions x 35% tax rate = \$2580 advantage (divided by) 12 = \$215.00 monthly donation  
Total charitable deduction \$7380 (divided by) \$3650 exemption amount = 2+ additional allowances

\$ \_\_\_\_\_ Deductions x \_\_\_\_\_% tax rate = \$ \_\_\_\_\_ advantage (divided by) 12 = \$ \_\_\_\_\_ monthly donation  
Total charitable deduction \$ \_\_\_\_\_ (divided by) \$3650 exemption amount = \_\_\_\_\_ additional allowances

**Start Giving Now: Change W-4 tax form at work. Add maximum allowances for faster tax advantage**

\$7380 mo gross income - \$7380 deduction = 0 tax for a month = \$2580 paid in 30 days thru payroll.

Your tax rate \_\_\_\_\_% Deductions \$ \_\_\_\_\_ = Cash donation \$ \_\_\_\_\_ # of days required \_\_\_\_\_

Add maximum allowances for 1-2 months to W-4 to receive your tax advantage then change it back  
Your employer must change your W-4 form in 30 days. Change your W-4 every month if you desire.

Please consult your tax advisor, tax attorney, certified financial planner, investment advisor or CPA

## Grant Pre-Qualification Form

You may print a copy of this form and then complete it. Or you may type the information online by placing the curser at end of the line and backspace to erase the line. Then type in the information. Save a copy for your records and email us a copy for grant approval.

Email our copy to: [max@secondchances.info](mailto:max@secondchances.info)

1. **Name:** \_\_\_\_\_

2. **Address:** \_\_\_\_\_

3. **City:** \_\_\_\_\_

4. **State:** \_\_\_\_\_

5. **Zip:** \_\_\_\_\_

6. **Phone:** \_\_\_\_\_

7. **E-mail:** \_\_\_\_\_

8. **Employed, Self Employed or Retired?** \_\_\_\_\_

9. **Do you rent, lease or own your own home?** \_\_\_\_\_

10. **Are you single, married, divorced or Widow/Widower?** \_\_\_\_\_

11. **How many children under 18 live with you?** \_\_\_\_\_

12. **What's your annual salary-income if married combine \$** \_\_\_\_\_

13. **Do you itemize your personal tax deductions?** \_\_\_\_\_

14. **What is your combined state and federal personal income tax rate?** \_\_\_\_\_

15. **Transfer the tax rate to worksheet for a cash grant dollar amount available.**