



A New Path Forward Campaign

Planning for Now

One-Time gift for a three-year impact

OR

A Three-Year Pledge

Investment of \$5,000 - \$250,000+

Unless specifically requested differently by you, your gift will be distributed the following way

- **25% Educational Programming**
*Science, Technology, Engineering, Math (STEM)
History Roundtables, Speakers, etc.*

- **25% Gateway to the Future Annual Appeal**

Funding the organization as a whole -climate control for artifacts and collections, grounds of Spiegel Grove, maintaining the Hayes Home, Museum, Library and Carriage House, etc.

- **25% Preservation of Collections and Artifacts**
-Prevent damage to and minimize deterioration of museum objects
-Hands-on work of museum artifact/preservation

- **25% Hayes Presidential Library & Museums' Endowment**

Match Frohman Foundation Challenge Gift: Manuscript and Photograph Collection Endowment

Planning for the Future



Become a Legacy Leader: Preserving—Conserving—Educating

Legacy Leaders is a leadership group comprised of people who demonstrate their recognition of the Hayes Presidential Library & Museums' value by including the Library and Museums as a beneficiary in their wills, life insurance policies, annuities, or other planned-giving vehicles. We know many of you already have included the Library & Museums in your estate gifts but have not yet made it known to us. We would appreciate you informing us of your plans.

As a Legacy Leader you will inspire others to do the same and secure the nation's first presidential library for many years.

Your gift will support the MUSEUM, GROUNDS, LIBRARY, HOME, EDUCATIONAL PROGRAMMING, AND MORE



Yes, I would like to support the New Path Forward Campaign for a 3-year impact with a gift of

\$ _____

_____ *One-Time Gift, for a three-year impact* OR _____ *3-Year Pledge*

Name: _____ Email: _____

Name to appear on donor recognition material: _____ Phone Preferred: Home/Cell/Office: _____

Address: _____ City: _____ State: _____ Zip: _____

Payment by: _____ Cash _____ Check _____ MasterCard _____ Visa _____ Discover _____ American Express

Total gift amount enclosed or pledged \$ _____ I would like to make pledge payments _____ Monthly _____ Quarterly _____ Annually

Card Number: _____ - _____ - _____ Expiration Date: _____ Verification Code: _____

Signature: _____ (Last three digits on back of card)

For more information or questions, please contact Kathy Boukissen at 419-332-2081 ext. 226 or kboukissen@rbhayes.org