

Support The Phillips Collection

I/We wish to become a member at the following level:

- | | |
|---|--|
| <input type="checkbox"/> Individual \$75+ | <input type="checkbox"/> Patron \$2,000+ |
| <input type="checkbox"/> Dual/Family \$120+ | <input type="checkbox"/> Director's Circle \$5,000+ |
| <input type="checkbox"/> Friend \$250+ | <input type="checkbox"/> Capital Circle \$10,000+ |
| <input type="checkbox"/> Contributing Friend \$600+ | <input type="checkbox"/> Chairman's Circle \$25,000+ |
| <input type="checkbox"/> Supporting Friend \$1,000+ | |
- Waive all benefits and make this contribution fully tax-deductible.

I/We wish to make a fully tax-deductible donation to the Annual Fund in the amount of \$ _____

OR direct my donation to one of the following areas:

- | | |
|---|---|
| <input type="checkbox"/> Education and Community Engagement | <input type="checkbox"/> Phillips Music |
| <input type="checkbox"/> Special Exhibitions | <input type="checkbox"/> Other _____ |

Please feel free to provide additional notes about your gift below:

Name (as it should appear in applicable donor listings) _____

E-mail _____ Phone _____

Address _____

City _____ State _____ ZIP _____

I/We would like to be listed anonymously.

Pledge/Payment Information

- Enclosed is a **check** payable to The Phillips Collection.
- Please charge my **credit card** \$ _____.
- | | | |
|---|-------------------------------------|-------------------------------|
| <input type="checkbox"/> American Express | <input type="checkbox"/> MasterCard | <input type="checkbox"/> Visa |
|---|-------------------------------------|-------------------------------|
- Number: _____ Expiration: _____
- Signature _____
- Please charge my credit card \$ _____ monthly, for ___ months beginning ___/___/___
- Please accept my pledge of \$ _____, which I expect to fulfill by ___/___/___

Legacy Investment

- I/we have included the Phillips in my/our estate plans and would like to receive information about the Eliza Laughlin Society, the Phillips's legacy giving group.
- I/we are interested in learning more about a legacy gift to the Phillips.

Thank you for your support!

Please mail or email this form to: advancement@phillipscollection.org
 Advancement Department, The Phillips Collection, 1600 21st Street NW, Washington, DC 20009