

Rebuild and Renew

The New Cottage Rehabilitation Hospital at Cottage Goleta Valley Campus



Gift Commitment

In consideration and recognition of the value and life-saving impact of Cottage Rehabilitation Hospital, and in consideration of other persons making contributions or pledges to support the building needs and renovation, equipment, technology, and programmatic needs of Cottage Rehabilitation Hospital,

Please print name(s) here: _____ As an individual, or as spouses or partners

Hereby commit the sum of \$ _____ in support Cottage Rehabilitation Hospital, to be paid to the:

Foundation for Cottage Rehabilitation and Goleta Valley Cottage Hospitals

in the following manner:

1. \$ _____ by December 31, 20 _____
2. \$ _____ by December 31, 20 _____
3. \$ _____ by December 31, 20 _____
4. \$ _____ by December 31, 20 _____
5. \$ _____ by December 31, 20 _____

I/We wish for this gift to be anonymous. Yes No

The purpose of my/our gift is to support the following hospital priority:

- | | |
|---|--|
| <input type="checkbox"/> Greatest Need | <input type="checkbox"/> Patient Care Programs |
| <input type="checkbox"/> Building/Construction | <input type="checkbox"/> Therapeutic Recreation |
| <input type="checkbox"/> Equipment and Technology | <input type="checkbox"/> Healing and Restorative Gardens |
| <input type="checkbox"/> Aquatic Center | |

I/We intend to structure the payments of this commitment in a way to leverage all the resources available to me which may include making contributions from:

- Business holdings
- Foundations with which I/we are involved
- Recommending distributions from donor-advised funds
- Partner with family members who want to join with me in supporting the hospital.

I/We understand that Cottage Rehabilitation Hospital is relying on this gift.

Any unpaid balance of this commitment will be addressed in my/our estate plans.

Executed this _____ day of _____, 20____, at _____, California.

Signature

Signature

Please print name here

Please print name here



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