

CEO Investor Pledge Form

The forms can be emailed to jclifford@fesco-oh.org or sent to 350 Stump Pike Road, Attica, Ohio 44807.

Business: _____

Contact (First & Last Name): _____

Address: _____

Phone: _____

Email: _____

I wish to contribute to the Crawford County Ohio CEO Program. In consideration of the gifts of others for the same purpose, I/we hereby agree to contribute the following:

Financials Support Options

___ INVESTOR: \$1,000/year for 3 years.

Your donation will be invoiced and collected Fall 2025, Fall 2026, and Fall 2027.

You will receive donor recognition through the CEO Class of 2027.

___ INVESTOR: \$3,000 one-time payment in full.

___ FRIEND OF CEO: (Less than \$1,000/Year) Amount \$_____.

INVESTOR & FRIEND OF CEO (check the one that applies):

___ \$1,000 a year for 3 years AND an additional one-time payment of \$_____.

___ \$1,000 a year for 3 years AND additional annual payments of \$_____.

___ \$3,000 one-time payment in full AND an additional one-time payment of \$_____.

Your donation will be invoiced and collected Fall 2025, Fall 2026, and Fall 2027.

You will receive donor recognition through the CEO Class of 2027.

Additional Engagement Opportunities

___ GUEST SPEAKER: We would like to volunteer someone from our organization to speak to the class about business or life skills.

___ BUSINESS VISIT: The class may tour our business at least one time in the course of the class year.

___ HOST SITE: We would like to provide a meeting place for up to 30 people for one or two months.

___ MENTOR: We would like to be paired with a student for the course of the class year so that they may call on me with questions and I may offer advice or other support as needed.

*By signing this form, I agree to receive emails with pertinent information regarding Crawford County CEO Program.

Signature

Date