

STRONG FOUNDATIONS Need Sturdy Pillars

You cannot build a foundation without sturdy pillars. They are what provide the necessary support to keep something standing upright. That's why the Community Foundation is creating The Pillar Society in 2021, made up of visionary supporters, like you, determined to preserve key philanthropic needs in our community and enhancing Foundation resources.

Here's why we need you. We know the needs in Marion County may look overwhelming, but we need strong philanthropic leaders who are willing to work alongside the Foundation in building a stronger community. Members of The Pillar Society will lead by example and be part of the solutions needed, while the Foundation serves as the guide connecting passions to purpose. Our vision continues to CREATE a philanthropic community where giving back comes naturally, CONNECT leadership and resources to protect and propel our community, and CAPITALIZE on funding causes that are important to our community. And we need you to take this vision to levels we have never seen before.

As an inaugural member of The Pillar Society, your three-year annual commitment of \$1,000, \$2,500, \$5,000 or \$10,000 will go a long way in helping the Community Foundation proactively work to ensure our community's needs are met. For your annual donation, you will be recognized as a member of this prestigious group.

Please join with us as we are

Building A Stronger Community... ONE PASSION AT A TIME







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ADD ME TO THE PILLAR SOCIETY!

By making a three-year commitment to the Community Foundation for Ocala/Marion County, you're ensuring philanthropy continues to thrive in our community.

Help us build a Stronger Community...

ONE PASSION AT A TIME

PER YEAR CONTRIBUTION

- O \$10,000
- **O** \$5,000
- \bigcirc \$2,500
- O \$1,000
- O I'm not interested in joining thePillar Society. Please insteadaccept my one-time gift of \$_____

• Keep my co	ontribution anonymous				
Business Nam	e:				
Business Addr	ess:				
City:		State:		_ Zip:	
Phone: ())	Alt. Phone: (_)		
Primary Repre	esentative Name:				
Title:		Email:			
Secondary Rep	presentative Name:				
Title:		Email:			
PAYMEN'	T INFORMATION	J:			
O Check l	Enclosed				
O Credit (Card: #				
	Security Code:		_ Exp. Date:		
	Signature:		-		

All checks should be made payable to: The Community Foundation for Ocala/Marion County

PLEASE MAIL COMPLETED FORM & PAYMENT TO:

The Community Foundation for Ocala/Marion County 324 SE 24th Street • Ocala, FL 34471

For more information or questions, please email Lauren DeIorio at Lauren@ocalafoundation.org or call (352) 622-5020 ext. 102