



# 2009-2010 Season Annual Fund and Re-Imagine Opera Challenge

I/We will support BLO's 2009-2010 Season Annual Fund with a contribution of \$ \_\_\_\_\_  
*\*\* Your gift can be eligible for the Re-Imagine Opera Challenge and matched dollar-for-dollar if it is 1) an increase over your total giving from the 2008-2009 Season (increased amount will be matched), 2) a gift in addition to what you have already given/pledged for the 2009-2010 Season, or 3) a new gift. (BLO's season runs July 1 to June 30.)*

Total enclosed \$ \_\_\_\_\_ Total pledged \$ \_\_\_\_\_ to be paid by (date) \_\_\_\_\_  
*(All payments must be received by the end of our fiscal year, June 30, 2010.)*

Please accept this gift via

- Check made payable to **Boston Lyric Opera**
- Credit card (number) \_\_\_\_\_ exp. date \_\_\_\_\_  
*(American Express, Discover, MasterCard and Visa accepted.)*

Card Security Code: \_\_\_\_\_ *(Last 3 digits on the back of card. For AMEX, 4 digits on front above card number.)*

- The \_\_\_\_\_ Foundation
- Appreciated securities: \_\_\_\_\_ shares of the following stock: \_\_\_\_\_  
*[Please be aware that gifts of stock are valued using the mean of the highest and lowest selling price on your intended gift date. The value on that date may be different from your intended gift amount. In cases where the value of the stock is less than the pledge, we ask donors to fulfill the balance before the end of the fiscal year.]*

Gifts of stock should be transferred to: *Scott Jacobi, Canaccord Adams  
99 High Street, 12<sup>th</sup> Floor, Boston, MA 02110  
Tel. 617.788.1507 • Fax 617.371.3796  
scott.jacobi@canaccordadams.com  
DTC Number: 0443 • BLO Account Number: JZJ150535*

- A matching gift form is enclosed for (company name): \_\_\_\_\_
- This gift is made  in memory of/  in honor of: \_\_\_\_\_
- Please send information about the Boris Goldovsky Society, BLO's Planned Giving Program.
- Boston Lyric Opera is named in my/our will or estate plan.
- Please do not include my/our name in electronic donor listings on BLO's website.
- I/We wish this gift to remain anonymous.

Name(s) \_\_\_\_\_  
*(Name as it appears here will be used as your preferred listing in Playbill and Annual Report donor listings.)*

Street \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Day Phone \_\_\_\_\_ Night Phone \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Please return this form to  
Boston Lyric Opera, PO Box 847897, Boston, MA 02284-7897**