

**DARKE COUNTY STEAM THRESHERS ASSN., INC. PLEDGE**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State and Zip:** \_\_\_\_\_

**Email if applicable:** \_\_\_\_\_

**I will pledge this amount \$ \_\_\_\_\_ in the following manner:**

**Lump Sum** \_\_\_\_\_

**Per Month \$** \_\_\_\_\_

**Make checks or money orders to:**

**Darke County Steam Threshers Assn., Inc**

**P.O.Box 87**

**Greenville Ohio 45331**

**The Officers and Trustees thank you for your support**