KPFK Pledge-on-Hold

Date: _____ **TOTAL PLEDGE: $** _____

Name (Please print clearly): _____
First Last

Address: _____ Apt #: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

[ ] First Time Sponsor
[ ] Renewal/Additional Donation

Program(s) I wish to support with my pledge:

_____

_____

_____

I will send my check when the following condition(s) are met:

(Check conditions that are applicable and/or add your own)

☐ 1) Abolish the "Gag Rule" and reinstate those suspended or fired for defying it.
☐ 2) Accountability to Listener-Supporters: open all books, budgets and financial reports.
☐ 3) Re-establish "Report to the Listener" - unscreened, uncensored listener call-ins at consistent, pre-announced times.
☐ 4) A return to diverse community-based, alternative programming.
☐ 5) Re-establish the apprenticeship program.
☐ 6) Removal of the KPFK management
☐ 7) _____
☐ 8) _____
☐ 9) _____
☐ 10) _____

☐ I WILL DOUBLE MY CONTRIBUTION IF CORPORATION FOR PUBLIC BROADCASTING FUNDING (CPB) FUNDING IS ELIMINATED AND KPFK BECOMES SOLELY LISTENER-SUPPORTED.

Please mail this form ASAP to: Pacifica Accountability Committee
P.O. Box 8331
Universal City, CA 91618-8331

Pacifica Accountability Committee will submit all Pledges-on-Hold to KPFK.