

Fort Worth Chamber Foundation, Inc. Donation Form

Donor Name: _____

Company Name: _____

Donor Address: _____

City: _____ ST: _____ ZIP: _____

Phone: _____

E-mail: _____

Donation Amount:

\$ 50
 \$ 100
 \$ 500
 Other \$ _____

How would you like to designate your donation?

General donation
 Support the Lisa Dodson Memorial Education Fund

Preferred Payment:

Check (Make payable to Fort Worth Chamber Foundation, Inc. If designating Dodson Fund, please write that on the note/memo line.)

Credit Card

Amex Visa MC Discover

Card#: _____ Exp. date: _____

Name Printed On Card: _____

Signature: _____

This gift is 100% tax-deductible as a charitable donation. No goods or services are exchanged for this donation.

____ Check here if you wish memorial and honorarium contributions to be acknowledged with a card that does not disclose the amount of the gift. Acknowledgment of your gift is mailed as quickly as possible, usually within a week. Please write below any verbiage you would like to be included.

