



WASHINGTON STATE BUSINESS AND PROFESSIONAL WOMEN'S FOUNDATION

TRANSMITTAL FORM

Date ____/____/____

Amount Enclosed: _____

Credit to:

Individual Contributor's name: _____

Local organization: _____

Contributor's Data:

Address: _____

City: _____ Zip _____ Ph. _____

Gift Description:

BPW Local contribution
(\$3 per member suggested minimum) \$ _____

Individual contribution
Bronze (less than \$25); Silver (\$25.00 - \$49.99);
Gold (\$50.00 - \$199.99); Platinum (\$200.00 +) \$ _____

Memorial _____ \$ _____

Name: _____

Address of family: _____

To Honor: _____ \$ _____

Occasion: _____

Address of honoree: _____

Other contributions:

Employer matching gift \$ _____

Bequest/Planned giving \$ _____

Member Training Grant Fund \$ _____

BPW/WA Speaker/Workshop Fund \$ _____

Please send all contributions to:

Washington State BPW Foundation

Virginia Murphy, Treasurer

P O Box 631

Chelan, WA 98816-0631

WSBPW FOUNDATION IS RECOGNIZED AS A CHARITABLE ORGANIZATION, 501 (C) (3), and contributions are tax-deductible to the extent allowed by law.