



# WASHINGTON STATE BUSINESS AND PROFESSIONAL WOMEN'S FOUNDATION

## DONATION FORM

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount Enclosed: \_\_\_\_\_

Credit to:

Individual Contributor's name: \_\_\_\_\_

Local organization: \_\_\_\_\_

Contributor's Data:

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

City: \_\_\_\_\_ Zip \_\_\_\_\_ Ph. \_\_\_\_\_

Email: \_\_\_\_\_

Gift Description:

BPW Local contribution: \_\_\_\_\_  
(\$5 per member suggested minimum) \$ \_\_\_\_\_

Individual contribution: \$ \_\_\_\_\_

In Memory of : \$ \_\_\_\_\_

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

Address of family: \_\_\_\_\_

\_\_\_\_\_

To Honor: \$ \_\_\_\_\_

Honoree's Name: \_\_\_\_\_

Occasion: \_\_\_\_\_

Address of honoree: \_\_\_\_\_

\_\_\_\_\_

Other contributions:

Employer matching gift \$ \_\_\_\_\_

Bequest/Planned giving \$ \_\_\_\_\_

Member Training Grant Fund \$ \_\_\_\_\_

BPW/WA Speaker/Workshop Fund \$ \_\_\_\_\_

Enclosed is my check, payable to Washington State BPW Foundation, in the amount of \$ \_\_\_\_\_.

Please charge my contribution of \$ \_\_\_\_\_ (minimum of \$10, please) to the following credit card:

\_\_\_ Discover \_\_\_ Mastercard \_\_\_ VISA \_\_\_ American Express Card Number: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CVV \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Please send all contributions to:

Washington State BPW Foundation  
Barbara Luddon, Treasurer  
165 NW Alta Drive  
Bremerton, WA 98310-2166

The primary objective of the Washington State Business and Professional Women's Foundation is to provide scholarships for women's education and training. WSBPW FOUNDATION IS RECOGNIZED AS A CHARITABLE ORGANIZATION, 501 (C) (3), [EIN 94-3231573], and contributions are tax-deductible to the extent allowed by law.