

# Contribution Form

Please mail to:

Hope Fund

800 Eglinton Lane

Charlottesville, Virginia 22903

Contributor's Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I would like to contribute \$\_\_\_\_\_ to the Hope Fund. Please make your check payable to the Hope Fund.

If you would like to make this contribution in honor of or in memory of someone (circle "honor" or "memory"), please provide the name: \_\_\_\_\_.

A card will be sent informing the following person of this honor or memorial:

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

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Thank you for your support and generosity.

Note from the Board: Please let us know if you would prefer to transfer stocks or bonds to the Hope Fund, and we will contact you with details of the appropriate procedure. If your company offers a matching charitable contribution program, please be sure to request a match to your contribution. Contact your company benefits office for the proper forms and procedure.

I understand that my contribution to this incorporated 501(c)(3) nonprofit fund is tax deductible and eligible for matching funds.