

Financial Donation Form



Please complete the form and mail or deliver to:

Southcentral Foundation
Attn: Finance Department
4175 Tudor Centre Drive
Anchorage, AK 99508

DONOR INFORMATION (Please Print)

Last Name:	First Name:
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Company/ Organization:

Mailing Address:	City, State, Zip Code:
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(A Donation Receipt will be mailed to this address)

Day Phone #:	Email Address:
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DONATION AMOUNT AND DESIGNATION	MEMORIALS & TRIBUTES
<p>Enclosed is my gift of \$ _____ to support Southcentral Foundation as a non-profit organization.</p> <p>Please designate one of the following programs to receive your gift:</p> <p><input type="checkbox"/> Employee & Community Assistance Fund</p> <p><input type="checkbox"/> Other SCF Departments or Programs – Please describe: _____ _____</p> <p>All contributions will be considered made to the general fund of the program or department, and may not be assigned to a specific project, individual or family.</p>	<p>This is a special gift:</p> <p><input type="checkbox"/> In Memory of: _____</p> <p><input type="checkbox"/> In Honor of: _____</p> <p><input type="checkbox"/> Comments: _____ _____</p>

~ ~ PLEASE ENCLOSE A CHECK OR MONEY ORDER ~ ~

Signature of Donor: _____

Signature

Date: _____