



## IN MEMORIAM DONATION FORM

YES, I want to support the Foundation and honor the memory of a friend or family member. Celebrate and remember a loved one by making a gift in their memory. The Army Women's Foundation will send a card to the family to acknowledge your gift.

### Donor Information:

Rank/Title	First Name	MI	Last Name
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Address ( )	City	State	Zip
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Phone	Email
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- Enclosed is my check made payable to: Army Women's Foundation
- I wish to charge my gift to:     Visa     MasterCard     Discover

Card # _____ / _____	Exp Date	SVC Code (On back)
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Name on Card	Signature
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Billing Address (if different than above)	City	State	Zip
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In Memory of: \_\_\_\_\_

### Person to be Acknowledged:

Rank/Title	First Name	MI	Last Name
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Address ( )	City	State	Zip
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Phone	Email
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- Please send information about planned giving and other potentially tax-deductible ways in which I can support the U.S. Army Women's Foundation.

The U.S. Army Women's Foundation is a 501(c)(3) organization.

Your contributions are tax deductible to the full extent allowed by the law. All donors will receive a gift receipt.

**THANK YOU FOR YOUR SUPPORT**

P.O. BOX 5030 ★ FORT LEE, VA 23801 ★ (804) 734-3078 ★ WWW.AWFDN.ORG