

DONATION FORM

Step 1: Donor Infor	mation							
This gift is from a Cha	gift is from a Chapter or Firm/Company		2	This gift is from an individual				
Name of Business or Firm/	Company		Prefix	First Name	MI	Last Name	Suffix	
Contact Name			Recog	nition Name (f	or public	acknowledgment)		
Job Title			ALA M	ALA Member#				
Email Address (We do not se	ell, rent, exchange or otherwis	se share your infori	mation with	any other organiz	ation or in	dividual)		
Step 2: Optional Gif	t Information							
☐ Please make this gift ANONYMOUS			Please make this gift in memory of in honor of Name					
Please indicate where the t	ribute card should be m	ailed:						
Name								
Address		City		Sta	te	Zip		
Step 3: Mailing Add	ress							
☐ Home ☐ Work								
Address								
City	State	Zip	Phone:	☐ Home	☐ Wo	ork		
Step 4: Donation								
Donation amount:	□ \$1,000 □ \$500	□ \$250	□ \$10	00 🗖 \$50		Other \$		
Donations made using	g a Credit Card mus	t be processe	d throu	gh the onlin	ie dona	tion form.		
Please return this com	pleted form with y	our donatior	n to:					
	Foundation of 8600 W. Bryn Suite 400N Chicago, IL 60	Mawr Avenu	le					

Double Your Donation!

Apply to your company for a matching gift. Check with your Human Resources Department to find out if contributions to the Foundation of ALA are matched in your workplace. Donations to the Foundation of ALA are fully tax deductible to the extent allowed by law. IRS Nonprofit ID# is 36-3156864.