

Donation Form

Yes! I want to donate to the Garnett Community Foundation!

Please complete this form, print it out, and enclose it with your tax deductible* donation, payable to the Garnett Community Foundation.

Mail to: Garnett Community Foundation, P.O. Box 285, Garnett, KS 66032

Name:				
Address:				
City, State, ZIP C	Code:			
	_) pport the Foundatio			
\$2	5	\$50	\$100	\$250
\$50		\$1,000	\$5,000	Other: \$
This is a:	One time dona	ation.	I	wish to pledge this amount annually.
(Examples, but not limi Lake Park, Veterans M Avenue/Streetscape, G	ited to: Garnett Recreatior Iemorial Park/South Lake, Garnett Remembers Patric	n Center, Garnett S Cedar Valley Res	Sports Complex, gei ervoir, Donna Harri	neral recreation programs, Garnett Public Library, North 's Park, Santa Fe Depot, Capper Memorial, Fourth t Fireworks Display, and the Garnett Country Club Golf
				n Garnett Community Foundation may use
Yes, my donatic following:	on is being made in	memory or in	honor of some	eone special. If so, please complete the
In Memory/Honor	r of:			
Yes, I would like	e to send an acknow	vledgement ca	ard. If so, plea	se complete the following:
Name:				
Address:				
City, State, ZIP C	Code:			

The Garnett Community Foundation is a 501(c)(3) nonprofit organization under the regulations of the Internal Revenue Service. All contributions to the Foundation are tax-deductible to the extent provided by law. Thank you!