



MARLINGTON EDUCATION INNOVATION FUND GENERAL DONATION FORM

First and Last Name_____

Street Address_____ City_____ State_____ Zip Code_____

Phone_____ Email_____

I would like to make a one-time donation in the amount of:

_____ \$5,000 _____ \$2,500 _____ \$1,000 _____ \$500 _____ \$250 _____ \$100 _____ Other

Does your employer match donations?

_____ Yes _____ No

If yes, please provide your Employer Name, Address and Contact Information for matching donations.

AKNOWLEDGEMENT INFORMATION

Please indicate how you wish to have your name appear in publications:

_____ - OR - _____

_____ I (we) wish to have our gift remain anonymous

Please acknowledge this gift_____ in honor of_____ or in memory of the following name(s):

_____	_____
_____	_____
_____	_____

PAYMENT INFORMATION

___ Check Enclosed

Make checks payable to: **Greater Alliance Foundation**

**The donation is for the Marlinton Education Innovation Fund.*

Signature:_____ Date:_____

Thank You!

All donations will be managed by the Greater Alliance Foundation, a tax-exempt, nonprofit corporation under O.R.C. Sec 501(c)(3), to which tax-deductible contributions may be made. A letter acknowledging receipt of your donation will be provided for tax purposes upon payment of the pledge. Payments must be received before the end of the year to be eligible for a tax deduction in that year. There is no minimum contribution amount.