

Memorial and Special Occasion Gifts

In Memory Honor

of: _____

You will receive confirmation for your gift. In addition, acknowledgement (without reference to amount) will be sent to the person(s) indicated below:

Name _____

Street Address _____

City _____ State _____ Zip _____

If you'd like to pay by credit card, please complete the following: Discover Master Card VISA

Account Number _____ Expiration Date _____

Signature _____ Date _____

We thank you for your Gift to the Community Foundation

Please direct this gift in the amount of \$ _____ to one of the Funds which have been created to strengthen Hancock County.

_____ Imagination Library	_____ The Enrichment Fund	_____ Clean and Green Fund
_____ Humanitarian Fund	_____ Agricultural Heritage Fund	_____ Community Vitality Fund
_____ Arts and Culture Fund	_____ Strong Families & Youth Fund	_____ Women's Fund

or _____ **Other Fund Name** _____

When receiving recognition for all gifts, I would like my/our name to appear as:

_____ Telephone _____

Address _____ City _____

State _____ Zip _____ Email _____

Thank You

Rather give on-line? Go to giveHCgrowHC.org
Donate Online



Give Where You Live, Grow Where You Live



giveHCgrowHC.org

PLACE
STAMP
HERE

HANCOCK COUNTY COMMUNITY FOUNDATION, INC.
312 E. MAIN STREET
GREENFIELD, IN 46140-9916