

The WOMEN'S FUND of WELD COUNTY

YES, I want to contribute to The Women's Fund endowment to improve the lives of women and girls in Greeley and Weld County.

I would like to contribute \$ _____

Check (payable to The Women's Fund of Weld County)

Charge my MasterCard VISA

Card Number _____

Expiration Date _____

Signature _____

I would like to make a pledge of \$ _____ payable over three years.

My pledge payments will be made:

semiannually annually

Please bill me charge my credit card

My first pledge payment is enclosed

Name _____

Address _____

City, State, Zip _____

Home Phone _____

Office Phone _____

Is your gift a **memorial** or a **tribute**? A letter advising of your gift, without reference of the amount, can be sent to the person(s) you indicate.

This gift of \$ _____

is **in memory** of: or is **in tribute** to:

Please send an acknowledgement letter to:

Name: _____

Address: _____

City, State, Zip: _____

Please send additional information about The Women's Fund in my estate planning.

Date _____

PO Box 336995 Greeley, Colorado 80633
(970) 304-9970