



League of Women Voters of Indiana

Donation Form

Please designate your contribution:

- I would like to contribute to the LWVIN Fund.
This contribution is not tax-deductible.
- I would like to contribute to the League of Women Voters/Indiana Education Fund, Inc.
This contribution is tax-deductible.

Please choose a donation amount:

- \$50
- \$100
- \$250
- _____ Other

Please provide your contact information:

Name/Names

Address

City / State / Zip

Telephone

E-mail Address

If your gift is in honor or memory of someone, The League of Women Voters will send an acknowledgement.

- This gift is: In Honor of _____
- In Memory of _____

Please send acknowledgement to:

Name

Address

THANK YOU!

Please mail your check and return with this donation form to:

League of Women Voters of Indiana
 1500 N. Delaware Street
 Indianapolis, IN 46202

Visit us online at www.lwvin.org