

Marshall County Arts Commission

Donor Contribution Form

Name _____ Street Address _____

P.O. Box _____ City _____ State _____ Zip _____

Phone _____ Cell _____ E-mail _____

Contact person (if business) _____

Contribution Categories

\$25.00 - \$499.00 \$1,000.00 - \$2,999.00 \$5,000.00 - \$9,999.00 \$25,000.00 and up

\$500.00 - \$999.00 \$3,000.00 - \$4,999.00 \$10,000.00 - \$24,999.00 Other _____

Contribution amount _____

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Sustaining contributions of a specified amount over a period of time may be a more convenient and appropriate method of providing continuing support for the Arts Commission.

I/we pledge to contribute _____

Please check one: ___ weekly ___ monthly ___ quarterly ___ yearly

 ___ other (please specify) _____

Total pledge _____

This contribution is made:

In honor of _____

In memory of _____

_____ If checked, the undersigned requests to remain anonymous as a donor.

Signed _____

Date _____

Print and return to: Marshall County Arts Commission, P.O. Box 692, Benton, KY 42025