## **DONATION FORM**



FIRST NAME	LAST NAME		
ADDRESS			
CITY	STATE	ZIP	
E-MAIL	PHONE		
Please indicate how you would li (If you do not want your name lis	-		ort.
PAYMENT OPTIONS:			
1. By Check (payable to Thomas My/our gift of \$ is 6 2. By Credit Card    VISA  MASTERCARD	enclosed.	RICAN EXPRESS	
One-time gift of \$ or r	ecurring gift of \$	_ per month for m	nonths beginning//
NAME (AS IT APPEARS ON CARD	)		
CARD NUMBER	EXP.	DATE	SECURITY CODE
HONOR/MEMORIAL G My gift is being made in hono		following individual(s	s):
Please notify (note name and add	dress of the person we sho	ould notify about this q	gift):
☐ I have included Poplar Forest☐ I would like to discuss includi☐ My/my spouse's company	ing Poplar Forest in my est	·	gift.
Please mail completed forms with Thomas Jefferson's Poplar		Flowers, P.O. Box	419, Forest, VA 24551
Thank you for your support! If yo	ou have any questions, ple	ase contact	

The Corporation for Jefferson's Poplar Forest is a 501(c)(3) non-profit organization. All gifts are tax deductible as provided by law.

Renée Flowers, Director of Development, at (434) 534-8129, or renee@poplarforest.org