



The David Nathan Meyerson

F O U N D A T I O N

Donation Form

All donations will be acknowledged with a receipt from The David Nathan Meyerson Foundation for federal income tax purposes.

DONATION INSTRUCTIONS	<p>Mail completed form to: The David Nathan Meyerson Foundation 3401 Armstrong Avenue Dallas, TX 75205</p> <p>If payment will be made by credit card, email or fax form to: Email: foundation@dnmf.org Fax: 214-443-5911</p>
YOUR INFORMATION	<p>Name: _____</p> <p>Street Address: _____</p> <p>City: _____</p> <p>State: _____</p> <p>Country: _____</p> <p>Zip / Postal Code: _____</p> <p>Telephone: _____</p> <p>Email: _____</p>
DONATION AMOUNT AND ALLOCATION	<p>\$ _____ General. <i>The Fund will determine how the donation is directed.</i></p> <p>\$ _____ Directed _____</p>

<p>ATTRIBUTION</p>	<p><input type="checkbox"/> Donation is to remain anonymous. <input type="checkbox"/> Donation should be made in my name. <input type="checkbox"/> Donation should be made <input type="checkbox"/> in honor of, or <input type="checkbox"/> in memory of:</p> <p>_____</p> <p><input type="checkbox"/> Please send additional acknowledgement of the Donation to:</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p>
<p>METHOD OF PAYMENT</p>	<p><input type="checkbox"/> Check or Money Order, payable to The David Nathan Meyerson Foundation.</p> <p><input type="checkbox"/> Credit Card:</p> <p>Type: _____</p> <p>Cardholder Name: _____</p> <p>Signature: _____</p> <p>Card Number: _____</p> <p>Verification Number: _____ Expiration Date: _____</p> <p>Billing Address: <input type="checkbox"/> Same as shown above in "YOUR INFORMATION"</p> <p>_____</p> <p>_____</p>
<p>COMMENTS/ SUGGESTIONS</p>	<p>Please let us know if you have any comments or suggestions:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>