



Plantation  
foundation  
Donation Form

Date: \_\_\_\_\_

*Thank you for supporting the Plantation Foundation!*

First Name(s): \_\_\_\_\_ Last Name(s): \_\_\_\_\_

Please check here **IF your address has NOT changed OR you are LISTED** in our Member Directory:   
If not, please complete the information below: (Your email address will be used to send a tax receipt.)

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email address: \_\_\_\_\_

Donation Amount: \$ \_\_\_\_\_ Payment method:  Check  Credit Card  Plantation Account # \_\_\_\_\_

Signature: \_\_\_\_\_ (Only required for Planation Acct Billing)

May we publish your name in the Morning Line-Donor List and our web site:  YES  NO

Please indicate if this is in honor  or memory  of someone: \_\_\_\_\_

Please return this form to: Jim Giralдин, 140 Retreat Place or email to [JPGiraldin@gmail.com](mailto:JPGiraldin@gmail.com)

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