



Please print this form, complete the following information, and mail your contribution along with this form to League of Women Voters of Arkansas Education Fund, P.O. Box 8592, Fayetteville AR 72703-0010

(Please print)

Name:

Email:

Phone:

<input type="text"/>	<input type="text"/>
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Street Address/City/State and Zip:

Please make your check payable to the League of Women Voters of Arkansas Education Fund (LWVAREF). Contributions made payable to LWVAREF, a 501 (c) (3) organization, are tax-deductible to the extent permitted by law.

CONTRIBUTION INFORMATION: Please circle one or at other: write in the amount.

\$1000 \$500 \$250 \$100 \$50 \$25 Other: \$_____

This gift is IN HONOR OF:

This gift is IN MEMORY OF:

Tribute Name:

Recipient Name:

Recipient Address:

Thank you for supporting the LWVAR Education Fund!
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