

DONOR INFORMATION



## MAIL-IN DONATION FORM - TORNADO RELIEF FUND

Please print this form and complete the information below to ensure we can properly process and acknowledge your donation.

Donor Name (Fi	rst Name and Last Nam	e):		
Organization Name (Fill this out only if you're making your donation on behalf of an organization):				
ADDRESS IN	FORMATION			
Address (If you'r	re making this donation	on behalf of an organization	n, please provide th	ne company's address):
City:			State:	Zip Code:
Country:				
Telephone Number (optional):			□ Home □ Mobile	
PAYMENT OF	PTIONS			
One Time Gift A	mount:			
☐ I'm enclosing	my check made payable	e to the Kentucky Chamber	Foundation Tornac	do Relief Fund
☐ Please charge	e my credit/debit card:			
□ Visa	☐ MasterCard	☐ American Express	□ Discover	
Cardholder's Na	ıme:			
Card Number: _				<u> </u>
Expiration Date:				

If you would like to make a donation online, please visit ksrtornadorelief.com

Please mail this completed form to: Kentucky Chamber Foundation | 464 Chenault Road |
Frankfort, KY 40601 | Attention: Tornado Relief Fund

The Internal Revenue Service recognizes the Kentucky Chamber Foundation, Inc., as a Section 501(c)(3) public charity. Our Federal Tax ID Number is 61-1284992. Contributions to the Kentucky Chamber Foundation may be eligible for tax deduction in the United States. Please consult your tax advisor for eligibility. No goods or services were offered or provided in exchange for this contribution. By making a donation, you are asked to provide personal information which may be able to be used to contact or identify you.

Your questions and feedback are very important to us. Please feel free to contact us at 502-695-4700. **Thank you for your support.**