

Washington State 4-H Foundation Tribute to a Friend or Memorial

MEMORIAL OR TRIBUTE GIFTS

Contributor Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Enclosed is my gift of \$ _____
(payable to Washington State 4-H Foundation)

_____ Check _____ Visa _____ MC
Card# _____
Exp Date ____/____
Signature: _____

Memorial

In memory of _____

Tribute

To Honor the _____ of _____
Occasion Honoree

Please send acknowledgement to: *(optional)*

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Send contributions to:

Washington State 4-H Foundation
2606 W. Pioneer
Puyallup, WA 98371-4998

Phone: (253) 445-4570
Fax: (253) 445-4649
Email: 4hfound@wsu.edu