

**Greater Portage Youth Education Foundation, Inc. Annual Donation Form:**

Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

E-mail Address (optional): \_\_\_\_\_

Phone (optional): \_\_\_\_\_

Amount of Contribution

\_\_\_\_\_ \$ 0 - 99

\_\_\_\_\_ \$ 100 - 249

\_\_\_\_\_ \$ 250 - 499

\_\_\_\_\_ \$ 500 - 999

\_\_\_\_\_ \$1,000 - 2,499

\_\_\_\_\_ \$2,500 - 4,999

\_\_\_\_\_ \$5,000 and over

**Please make your tax deductible check payable to: GPYEF, Inc. Mail your check and this form to P.O. Box 872, Portage, WI 53901.**

Planned Giving:

\_\_\_\_\_ I have provided for GPYEF in my will.

\_\_\_\_\_ I would like information for putting GPYEF in my will.