



Friends of Perry-Mansfield

40755 COUNTY ROAD 36
STEAMBOAT SPRINGS, CO 80487

Mr. Ms. Mr. & Mrs. Other _____

Name (s)

Address

City State Zip

(_____) _____ (_____) _____
Home Phone Business Phone

Email

Enclosed is my contribution of:

- \$50 \$100 \$250 \$500 \$1,000
- \$2,500 \$5,000 \$10,000 Other:\$ _____

All contributions are tax-deductible, minus the fair market value of any benefits provided.

- Please make my gift fully tax deductible; I do not wish to receive any additional donor benefits
- Please send information on including Perry-Mansfield in my long-term financial plans.
- My check payable to Perry-Mansfield is enclosed in the amount of \$ _____

Please charge my gift of \$ _____ to my MasterCard Visa

Name of Cardholder

Card Number

_____/_____
Expiration Date SIGNATURE

My gift will be matched by employer.

Company Name

_____ Ratio (please enclose a matching gift form)

THANK YOU!

(970) 879-7125

Friends@Perry-Mansfield.org

www.Perry-Mansfield.org