



DONOR CONTRIBUTION FORM

TIRF is a 501(c)(3) nonprofit organization. Contributions are deductible to the extent provided by law. Our federal tax identification number is 54-1939288.

NAME _____ TITLE _____

BUSINESS NAME (if applicable) _____

HOME/BUSINESS ADDRESS _____

CITY, STATE ZIP _____

TELEPHONE (____) _____ EMAIL _____

Recognizing Your Gift (check applicable item(s)):

___ I would like this gift to be in memory of/in honor of _____

___ You may include my name or organization in public listings of donors, as follows:

___ I DO NOT wish my name or organization to be included in public listings of donors.

Details about Your Gift:

___ My full payment in the amount of \$_____ is enclosed.

I pledge to contribute a total of \$_____ to The International Research Foundation (TIRF).

___ I will remit my full/first payment on or before _____ (date).

___ A matching gift totaling \$_____ will be made by _____ (company name).

SIGNATURE _____ DATE _____

Your gift may be mailed to the following address:

TIRF
PO Box 332
Interlochen, MI 49643-0332

Thank you!
The Board of Trustees, TIRF