LEAF DONATION FORM



I/We wish to support LEAF by making a gift in the amount of \$ _____

I/We wish to specifically support:

- ____ LEAF General Fund
- ____ Scholarships
 - ____ Maldonado/Sparrow
 - ____ South Lansing Kiwanis
 - _____ John Aldinger (Vocational Education)
 - ____ John Aldinger (Educational)
 - ____ Clayton Kowalk
 - ____ Richard Halik
 - ____ Cecil Nickel
 - ____ Mark Mehaffey (Art Interest)
 - ____ Eva Evans (visual and Performing Arts)
 - ____ Maria Velasquez
- ____ Minigrants to Teachers
- Peer Mediation
- ____ Middle School journalism Program
- ____ Art Programs

____ Music Programs

My/Our name as it should appear for LEAF recognition:

Company (if applicable)		
Address		
City	State	ZIP
Home Phone ()	_ Office Phone ()	
// Please contact us to discuss making a planned gift to LEAF. Call Anne Goudie (517) 887-1175.		
Matching gift programs at your workplace can double or even triple your gift to LEAF. Please call your		

Matching gift programs at your workplace can double or even triple your gift to LEAF. Please call your Human Resources Department to see if your company has a matching gifts program. LEAF is a 501(c)3 non-profit foundation. All donations to LEAF are tax deductible.

Please complete this form and return it to: LEAF, 2901 Wabash Road, Lansing, MI 48910