

Sandra Ellsworth Memorial Award



I wish to give a gift in the memory of Sandra Ellsworth. I understand that my gift will be used toward an annual scholarship in Sandra's name.

Here is my gift:

Method of Payment

Cash \$ _____

Check \$ _____

Please sign regardless of payment method you choose.

Signature

Date

Gifts at any amount are appreciated and are fully tax deductible.
The HEF is organized and operated under IRS Code 501 (c)(3)

Thank You For Your Generous Support

Name _____

Address _____

City _____

State _____ Zip _____

Home Phone _____

Work Phone _____

E-mail _____

Information provided is used only to credit your contribution. The HEF will NEVER sell, rent or exchange information about you.

Recognition

- I prefer for my gift to remain anonymous.
- I would like to be recognized for my contribution.

Mail to:

**Homer Education Foundation
PO Box 174
Homer, New York
13077**