



Please return to:
Michigan 4-H Foundation
535 Chestnut Road, Room 240
East Lansing, MI 48824
Phone: (517) 353-6692
FAX: (517) 432-3310
Email: info@mi4hfdtn.org
Web: www.mi4hfdtn.org



Gifts to the Michigan 4-H Foundation can also be made in the form of appreciated stock and other appreciated securities, charitable gift annuities, life insurance or retirement funds, bequests and in-kind gifts. Please contact the Michigan 4-H Foundation at (517) 353-6692 for instructions on making non-cash gifts. It is recommended that you consult with your tax adviser or attorney as well as with a Michigan 4-H Foundation representative before making a non-cash gift to verify that your intention can be met.

The Michigan 4-H Foundation, a public foundation headquartered in East Lansing, Michigan, USA, receives charitable contributions and special grants for the development and support of 4-H youth programs in Michigan. The foundation is licensed to solicit charitable gifts by the state of Michigan. (MICS 2751)

St. Joseph MAKE THE MATCH FOR OUR COUNTY



DONOR INFORMATION

Name _____
Address _____
City _____ State _____ ZIP _____
Phone (_____) _____ Email _____
4-H affiliation: ☐ 4-H alumnus ☐ 4-H volunteer ☐ 4-H member ☐ 4-H friend
☐ 4-H parent ☐ 4-H staff member ☐ MSUE/4-H staff retiree
County of 4-H involvement (include state, if not Michigan) _____

GIFT INFORMATION

Yes, I/we want to help Make the Match for our county with a gift of \$_____ for our county 4-H endowment!

My gift is to help Make the Match for:

☒ St. Joseph County 4-H Endowment Fund

My gift is being paid by:

- ☐ In full by cash/check for \$_____. Payable to Michigan 4-H Foundation.
- ☐ In full with my credit/debit card. Check one: ☐ MasterCard® ☐ Visa® ☐ Discover® ☐ AmExp®
Name (as it appears on card) _____
Credit Card No. _____ Exp. (mm/yy) _____
Signature _____
- ☐ As a first pledge payment of \$_____ toward a total gift pledge of \$_____.
The balance payable in equal amounts over the next _____ (up to 5 years). Please send payment reminders:
☐ Annually.
☐ Quarterly.
☐ Monthly using automatic bank transfer from my checking account.
For this option, please also complete automatic bank transfer form online at: www.mi4hfdtn.org/forms/AFTform.pdf.

Donor Signature _____

☐ Stock, ☐ Property, ☐ Other _____

☐ I am employed by a matching gift company and have enclosed the form for this purpose.

ADDITIONAL GIFT INSTRUCTIONS: _____
