## FINE ARTS SCHOLARSHIP FUND

## **DONATION FORM**

Date:	Donation Amount:	
Donor's/Club's Name: _		
Address:		
City:	State:	Zip:
Telephone:	Email:	
Personal Gift	(or) Club/District G	ift:
	Mail to: Allison Belisle eplechase Circle Beavert	on, OR 97008
*****	*****	+++++++++++++++++++++++++++++++++++++++
SCHOLARS	HIP LOAN & FELLO	WSHIP FUND
	DONATION FORM	
( <b>G</b> o <b>F</b> or	ward <b>W</b> ith <b>C</b> onfidence scl	holarship)
Date:	Donation Amount:	
Donor's/Club's Name: _		
Address:		
City:	State:	Zip:
Telephone:	Email:	
Personal Gift	(or) Club/District G	ift:
	Mail to: Valerie Huey	