

Donation form

I enclose a contribution of \$ _____ to Rosslyn Chapel Trust

(Optional) It is my suggestion that these funds be used for the following special need or purpose:

Name _____

Street _____

City, state, zip _____

Email (optional) _____

Daytime telephone (optional) _____

Please make all checks payable to: **The American Fund for Charities.**

Please put in the memo line: **Rossllyn Chapel Trust**

Donation amount \$ _____ Description *cash, shares or property* _____

Card number

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Card Type *please circle* Security number

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Mastercard / Visa / Amex *three or four digit security code*

date card expires *mm/yy*

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Cardholder's name *as it appears on the card* _____

Cardholder's signature _____ Date _____

Please mail this form and your contribution to:
American Fund for Charities, c/o Chapel & York, 1000 N. West St, Suite 1200, Wilmington, DE 19801
Attn: Rossllyn Chapel Trust

Thank you for supporting Rossllyn Chapel Trust