



## Donation Form

**Donor:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_  
**State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**E-Mail:** \_\_\_\_\_

**Date of Gift:** \_\_\_\_\_

**Gift Amount:** \_\_\_\_\_

**Gift Type:**

\_\_\_\_\_ **Cash/Check**  
\_\_\_\_\_ **Pledge (Amount per year \$ \_\_\_\_\_ Number of Years \_\_\_\_\_)**  
\_\_\_\_\_ **Stock**  
\_\_\_\_\_ **Other**  
\_\_\_\_\_ **Gift In-Kind**  
**Description:** \_\_\_\_\_

**Percentage of Gift Distribution:**

\_\_\_\_\_ **to TeamMates Local Chapter (Chapter Name \_\_\_\_\_)**  
\_\_\_\_\_ **to TeamMates Statewide Mentoring Program**

**All gifts of \$500 or more will be listed in the TeamMates Annual Report.  
Please indicate how you would like to be listed.**

**Please forward this form along with your donation to:**

TeamMates Mentoring Program  
6801 "O" Street  
Lincoln, NE 68510  
1-877-531-8326 (TEAM) or 402-323-6250

**Thank you for your donation to TeamMates Mentoring Program!**