

Achieving My Dreams Foundation



DONATION FORM

Address Information

Name _____

Title _____

Company _____

Work Address _____

City _____ State _____ Zip Code _____

Phone _____ Cell _____ Fax _____

E-Mail _____

For tax purposes, my preferred mailing address is (check one) Work Home

Gift Amount in U.S. Dollars

Chairman's Circle - \$10,000 or more Benefactor - \$1,000 or \$2,499 Friend - up to \$100

President's Circle - \$5,000 - \$9,999 Patron - \$500 - \$999 Other \$ _____

Sponsor - \$2,500 - \$4,999 Supporter - \$100 - \$499

How would you like your contribution to be listed? (i.e. your name only, name and company, company only) Please enter here: _____

Check here if you would like your donation to remain anonymous

Donation Method

Cash Check (Make payable to AMD Foundation. Checks must be in U.S. dollars and drawn on a U.S. bank.)

Authorized Signature: _____

Thank you for your donation!

The AMD Foundation is a 501(c)(3) organization, which qualifies your donation as charitable contribution for tax exempt.

**Achieving My Dreams Foundation
Attn: Donation Chair
P.O. Box 5202; Oxnard, CA 93031
Office: 805-983-1151 Fax: 805-512-8109**