

**BOYD COUNTY FOUNDATION FOR CHILDREN, INC.
DONATION FORM**

Please print this form and send to the address below

I would like to help support the realization of the primary goal of the Boyd County Public Schools Foundation for Children, Inc. which is to assist in providing quality education to all its students. Therefore, I am submitting my tax-deductible donation or request for more information to:

**The Boyd County Foundation For Children, Inc.,
Attn: Teresa Meade
1104 Bob McCullough Drive, Ashland, KY 41102**

NAME _____

ADDRESS _____

TELEPHONE _____

CITY _____ STATE _____ ZIP _____

Visa/MasterCard No. _____

Expiration date: _____ Amount donated: _____

I have included the Foundation in my Will or Estate Plan.

I am interested in other ways to give such as Estate planning, life insurance beneficiary designation, Trusts or Endowments and would like someone to contact me about giving in this way.

I would like to make a one-time donation in the amount of _____ and have enclosed a check to the Boyd County Public Schools Foundation for Children.

I would like to make a yearly donation in the amount of _____/yr. for the next _____ years and have enclosed a check payable to the Boyd County Foundation for Children, for the year _____.

I am an employee of Boyd County Public Schools and would like to make a pledge donation of _____/pay period and give permission for the donation to be payroll deducted.

Signature

Date