

Celebrate Mother's Day by Honoring Special Women in Your Life

PLEASE PRINT

Donor Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Enclosed is my gift of \$ _____

**Please make checks payable to the ACCF Women's Fund
or make your contribution online at www.accommunityfoundation.org**

Please identify the "special" woman below:

in honor of _____

in memory of _____

Please send card/acknowledge gift (not amount) to:

Name _____

Address _____

City/State/Zip _____

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