

## CONTRIBUTE TO THE EMILY M LYMAN FOUNDATION

Enclosed is a contribution: \_\_\_\_\_ In Memory of \_\_\_\_\_ In Honor of

Name: \_\_\_\_\_

For the amount of: \$ \_\_\_\_\_

Please acknowledge to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Donor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I wish to pay by check. Please make checks payable to the *Emily M Lyman Foundation* and mail to the following address:

The Emily M Lyman Foundation  
161 Appletree Point Road  
Burlington, VT 05408

I wish to make a donation using my credit card:

Name on card: \_\_\_\_\_ Type of card: \_\_\_\_\_

Credit card #: \_\_\_\_\_ Exp. date: \_\_\_\_\_

Security code (3 #s): \_\_\_\_\_

Amount to be charged: \_\_\_\_\_

*The Emily M Lyman Foundation is a 501(c)(3) Non-Profit Organization.*

*All donations are tax-deductible.*

*Thank you!*

