



Donation Form

Ph: 563-559-0139

Fax: 815-589-3229

Email: info@thecomplexsite.com

www.thecomplexsite.com

Mail Donations to: P.O. Box 106

Fulton, IL 61252

- I'd like to make a personal donation
 I'd like to make a donation in memory of someone
 I'd like to make a donation in honor of someone

I want to make a one-time donation of: \$ _____
(Make checks payable to: The Complex)

I want to make a 3-year pledge donation of: \$ _____

I want to make a monthly donation of: \$ _____
(Monthly donations must be directly withdrawn from your checking account. The Complex will contact you for authorization)

- Yes, you have my permission to publish my name for donating to The Complex.
 No, please do not disclose information pertaining to my donation, I wish to remain anonymous.

The Complex plans to display a list of everyone who contributed to the project to offer recognition of their gracious donation once the facility is open.

Please print name as you'd like it to appear at The Complex _____

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ E-mail Address _____

Contributor's Signature _____ Date _____

Thank You for Donating!