

## **MAKE A GIFT**

## **DONOR INFORMATION**

Name:
Address:
City: State: Zip:
Phone: Email address:
GIFT INFORMATION
□ \$500 □ \$1,500 □ \$2,500 □ \$5,000 □ Other:
Please direct my/ our gift to support:
$\square$ Unrestricted Mission Support $\square$ Scholarships $\square$ Special Exhibitions
☐ Public Education Programs ☐ Other:
$\square$ My/ our gift is enclosed. Please make checks payable to the Pennsylvania Academy of the Fine Arts.
$\square$ Please charge my/ our credit card: $\square$ Visa $\square$ MasterCard $\square$ American Express
Number:Expiration Date:
Cardholder Name:
☐ I/ we would like to make a gift of securities or wire transfer (PAFA will contact you with instructions)
$\square$ I/ we will recommend my/ our donor advised fund or family foundation make a gift to PAFA.
I/we accept that, due to IRS guidelines, PAFA is unable to extend tangible goods or services, such as membership benefits or event tickets, in exchange for gifts made through donor advised funds or family foundations.
Name of fund or foundation:
☐ My company will provide a matching gift to maximize my/ our support.
Name of company:
RECOGNITION
☐ Please recognize me/ us in donor listings as:
☐ Anonymous
$\hfill\square$ My/ our gift is made in honor/ memory of:
SIGNATURE DATE

 $Please\ contact\ PAFA\ at\ 215-972-2597\ or\ \underline{giving@pafa.org}\ with\ any\ questions, or\ to\ learn\ more\ about\ other\ ways\ to\ make\ a\ gift\ to\ PAFA.$