

## **CHAPTER OR GROUP CONTRIBUTION FORM**

**ALPHA STATE TEXAS EDUCATIONAL FOUNDATION (ASTEF)** 

## Instructions:

- A separate contribution form and check are required for each fund to which a gift is made.
- Gift acknowledgement will be sent to the honoree or to the person designated for a memorial gift.
- Mail completed contribution forms with checks made payable to ASTEF to PO Box 797787, Dallas, TX 75379.

Date Amount \$

**NAME of FUND** to which contribution is to be applied. (Please check only one)

Scholarship Fund

Leadership Fund

Projects Fund

**GIFT IS FROM** 

(Name of chapter, area number, or group)

## TREASURER CONTACT INFORMATION

(The above name will appear on the acknowledgment sent to the honoree or person designated for memorial.)

Name	Email	
Mailing Address	Telephone	
City/Zip Code		

Complete one of the following (optional)

In MEMORY OF In HONOR OF

Please notify the following person of the gift/contribution (optional)

Name	
Mailing Address	
City/State/Zip Code	

## <u>For CHAPTER RECOGNITION ONLY</u> – Please send a separate form and check to contribute to different funds. FOR RECOGNITION IN THE TSO CONVENTION PROGRAM, CONTRIBUTIONS MUST BE POSTMARKED BY APRIL 1.

Scholarship Fund	Leadership Fund	Projects Fund
Honors - \$1 per member	Journeyers - \$1 per member	Groundbreakers - \$1 per member
Double Honors - \$2 per member	Trailblazers - \$2 per member	Builders - \$2 per member
Triple Honors - \$3 per member	Chapter Contribution	Chapter Contribution
Chapter Contribution		

**SPECIAL INSTRUCTIONS:** 

THANK YOU FOR DONATING TO OUR FOUNDATION!