

MidwayUSA Foundation, Inc.

6001 W Van Horn Tavern Rd, Suite C Columbia, MO 65203-9258 MidwayUSAFoundation.org | 877.375.4570

	2020 Vortex	COptics Combo Dona	ation Form		
Date		Donor Name			
Address (Street, City, State, Zip)					
Contact Information		Email:			
		Phone Number: ()	-		
Total Endowmen	t Donation		\$		
How many Vortex Optics Combos does this donation cover? Minimum Recommended Donation per Item = \$875					
FILL	. US IN ON <u>YOUR</u> SUCCESS! WE A	IM TO HELP FUND YOUR ENDOWMENT I	NOW AND INTO THE FUT	<u>ΓURE</u> !	
How much was raised OVERALL utilizing this fundraising item(s)?			\$		
Please designate	below how your <u>Total Endowment [</u>	Donation should be allocated (The sum of all Dona	tion Amounts should equal your <u>T</u>	otal Endowment D	onation)
Endowment Account Name			Endowment Account ID	Donation Amount	
				\$	
				\$	
				\$	
				\$	
				\$	
	Team Endowment Account(s) lis	sted above must be active and listed at N	1idwayUSAFoundation.c	rg	
Indicate belo		Name as you would like it shown on ou E display name is permitted for a do	•	tion as a dor	nor.
Donor Display Na	ame				
If you'd like this donation (as well as past donations) to display as 'Anonymous,' please check THIS box.					
	Make checks	payable to: MidwayUSA Foundat	ion, Inc.		
	Mai	I donation along with this form to			

Mail donation, along with this form to: MidwayUSA Foundation, Inc. - Fundraising Donation 6001 W Van Horn Tavern Rd, Suite C Columbia, MO 65203-9258

As a qualified charitable organization exempt from Federal and state income tax under Section 501(c) (3) of the Internal Revenue Code, all donations are tax deductible. Upon processing the donation, a gift receipt will be issued.

For questions regarding this donation, please email us at info@midwayusafoundation.org Please review the details of our current Matching Program by visiting MidwayUSAFoundation.org/Matching

VCR20 Rev 11/19