

Please send in your donation with this form to:

McCormick Foundation Communities Matching Fund 24538 Network Place Chicago, IL 60673-1245

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Is this donation on behalf	of an organization? □ Yes	s □ No	Org. Name	
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Donation Information:				
I would like to make a gift	in the amount of:			
Enclosed is my che	eck payable to <i>McCormick Fo</i>	undation Co	mmunities Matching Fu	und
Please charge my	□ Visa □ Ma	sterCard	□ Discover	☐ American Express
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Card Number		E>	кр Signatur	e
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Have you included an employer matching gift form?			l Yes □ No	
Donation Acknowledgme	<u>ent</u>			
You can choose to make y	our gift a tribute to a person yo	ou know or ac	dmire.	
Please make my gift:	In honor of In memory of			
If you would like this indivi-	dual or his/her family to receive	e a letter reco	gnizing your gift, please	include the information below.
Your name and donation r	may be listed in future publicati	ons or online.	. To be included, check Y	'es below.
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