

# Vinton Community Foundation Contribution Form

Yes! I care and want to support my community.

**Donor Contact Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number (Optional): \_\_\_\_\_

Email (Optional): \_\_\_\_\_

This gift is in honor of: \_\_\_\_\_

This gift in memory of: \_\_\_\_\_

I would like to make a tax deductible donation.

My check is enclosed, payable to "The Vinton Community Foundation".

\_\_\_\_\_ \$50 \_\_\_\_\_ \$100 \_\_\_\_\_ \$500 \_\_\_\_\_ Other

\_\_\_\_\_ Restricted to the Endowment Fund

\_\_\_\_\_ Restricted for specific purpose listed below

\_\_\_\_\_

\_\_\_\_\_ Unrestricted for distribution to Grant recipients

Send checks to:

Farmers Savings Bank & Trust  
401 B Avenue  
Vinton, IA 52349