

The Golden West Foundation

"Making a difference in the lives of seniors."

Please return with your donation to:

Golden West Foundation

1055 Adams Circle

Boulder, CO 80303

Name _____

Billing Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

This contribution is in honor of/in memory of (please circle one)

(Please note if you would like your contribution to remain anonymous.)

Included is my gift of (fill in dollar amount): \$ _____

I want my contribution to go toward (check one):

- The Golden West General Assistance Fund
- The Critical Infrastructure Improvements Fund
- The Wellness and Other Vital Programs Fund
- The Rental and Food Assistance Fund
- The Assisted Living Services Fund

I wish to pledge my donation to be made in equal installments:

- Quarterly Monthly (Please include credit card info)*

Please make checks payable to Golden West Foundation, or pay by credit card:

Visa MasterCard

Card # _____

Exp. Date _____ Security Code _____

Signature _____

*If you would like to make a credit card donation under \$35, please visit our Web site, www.gwboulder.org/gwfound, to make an online donation through givingfirst.org. The Community First Foundation manages this site and pays all credit card fees for its members, which helps us maximize the benefit of your donation.