**ELLE FOUNDATION INC.**

**CREATING MEMORIES OF JOY FOR CHILDREN WITH CANCER BY GRANTING FINAL WISHES FOR CHILDREN**

**BATTLING A RECURRENCE**

Donor Information:

Please Print

\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title First Name Last Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name (if applicable)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address

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City State Zip Code

Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contribution: \_\_\_\_\_\_$50 \_\_\_\_\_$100 \_\_\_\_$250 \_\_\_\_$500 \_\_\_\_$1000 \_\_\_\_Other $\_\_\_\_\_\_\_\_

My Donation is: \_\_\_\_\_\_ In Honor of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occasion\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(i.e. birthday, anniversary, marriage)

\_\_\_\_\_\_In Memory of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_In Memory of Lauren’s life and legacy

***Please complete the section below if you would like a Letter of Donation Notification sent to the***

***person/family named above (in honor or in memory of):***

**\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Title First Name Last Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code

**Mail this form, along with your check payable to the Elle Foundation Inc., to:**

**Elle Foundation Inc.**

**P.O. Box 8068**

**Bridgewater, NJ 08807-8068**

**www.ellefoundation.org**

**ELLE FOUNDATION INC. QUALIFIES FOR MANY COMPANIES’ MATCHING GIFT PROGRAMS.**

**EMPLOYEES CAN DIRECT THEIR AT-WORK UNITED WAY DONATIONS TO THE ELLE FOUNDATION.**

**LIKE US ON FACEBOOK AT ELLE FOUNDATION INC NEWS.**

Check#: Check Date:

Elle Foundation, Inc. (Tax ID # 26-4755717) is a 501(C)(3) tax-exempt non-profit organization.