



Contribution Form

Thank you! Your dedication and support to the building of The Palmer-Donavin House for individuals with mental retardation and developmental disabilities certainly will make the world a better place and honor our 100 years in business.

The undersigned individual/corporation pledges a total sum of \$ _____, payable over
 one or two years (*please select one*). Our preferred payment schedule is _____
(*month/year*) each year beginning _____ (*month/year*).

Individual/Corporation/Foundation Name

Address Street Suite No.

City State Zip

Telephone No. Facsimile No. E-Mail

By: _____
Print Name Signature

Date

The Palmer-Donavin House plans to recognize contributors to the campaign in various ways, including through printed materials. Please indicate the name of the individual(s) or corporation to be recognized, if we may recognize you by gift level or whether you prefer to remain anonymous. Please check all that apply:

- Individual/Corporation to be recognized: _____
- You may list my gift amount.
- We wish to remain anonymous.

No goods or services (in whole or in part) were provided; therefore the entire amount tax-deductible.
Please make checks payable to: Franklin County Residential Services and send to:

Robyn Pollina, CPA
Palmer-Donavin Manufacturing Co.
1200 Steelwood Road
Columbus, Ohio 43212-1372

Thank you for your generosity.