

MBF DONOR CONTRIBUTION FORM



DONOR INFORMATION

Name _____

Address _____

City, State Zip _____

Daytime Phone () _____ E-mail Address _____

GIFT INFORMATION

Enclosed is my gift of \$ _____. Please make check payable to the *Massachusetts Bar Foundation*.

Please charge my credit card in the amount of \$ _____.

- MasterCard Visa American Express

Credit Card Number _____ Expiration Date _____

Name on Card _____

Signature _____

Please apply my contribution as follows:

- Wherever the need is the greatest.**
- Fellows Fund** – Non-pledge contributions to increase the Foundation’s capacity to provide innovative mission-related grants.
- Fellows Pledge** – Payment toward my established Society of Fellows pledge.
- Civil Justice Fund** –to provide legal services to the poor and comply with the SJC’s Code of Professional Responsibility, Rule 6.1.
- George P. Napolitano Internship Fund** – to support an annual legal internship at the Massachusetts Commission Against Discrimination, in honor of former General Counsel George P. Napolitano
- Honor or Memorial Gift** – to honor or memorialize a colleague, friend, or family member. The MBF will acknowledge your gift with a personal note sent directly to your designee. Please include the designee’s name and address in the notes section below.

Notes:

MAIL TO: Mass. Bar Foundation, 20 West Street, Boston, MA 02111-1204