



DONATION FORM

Individuals are invited to donate to the Mississippi Bar Foundation in memory of any Mississippi attorney. The Foundation will ensure the family is notified in writing of your thoughtful gesture.

Donor's Name: _____

Donor's Address: _____

Donor's City, State, ZIP: _____

Donor's Email Address: _____

Amount Donated: _____

Donation is in Memory of (name): _____

Please provide a name and address for the family that is to be notified in writing of your donation:

Name: _____

Address: _____

City, State, ZIP: _____

Please be aware that as a 501(c)3 organization, we are required to send a receipt for donations of \$150 or more. If an Email Address is listed on this form, we will email a receipt. If no email is listed, we will mail the printed receipt to the Donor's Name and Address listed on this form.

Mail this form with your payment to:

Mississippi Bar Foundation

P.O. Box 2168

Jackson, MS 39225-2168