

Medina County 4-H Endowment Donation Form

Please acknowledge and record this gift as coming from:

Name _____ Date _____ Amount Enclosed \$ _____

Address _____ Check Number _____

City _____ State _____ Zip _____ Phone (____) _____

Check if you wish to remain anonymous _____

Send acknowledgement card for Memorial or Honorarium to:
(Donation amount not mentioned)

Complete if Applicable:

____ This donation is in memory of (name) _____ Name _____
(person is deceased)

Address _____

____ This donation is in honor of (name) _____
(person is living)

Make check or money order payable to: **The Ohio State University**. (No cash please)
On check memo line designate: **Medina Co. 4-H Endowment**

Mail to: OSU Extension - Medina County
120 W Washington St. Suite IL
Medina, Ohio 44256

lorain.osu.edu

