





85th Anniversary "Hopes, Wishes & Dreams Fulfilled" - WASHINGTON COUNTY MUSEUM OF FINE ARTS - ANNUAL FUND

Enclosed is my gift: \$1,000 \$500 \$250 \$100 Other: \$ _____

I Pledge \$ _____ A Month For _____ Months - A Total Gift of \$ _____ (Credit Card Only)

(Installment plans are automatically charged on a monthly basis. Please submit your gift before June 30th, which marks the end of WCMFA's fiscal year.)

Name _____
Street Address _____
City, State and Zip _____
Email _____

<input type="checkbox"/> Check enclosed (made payable to WCMFA)	<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 
Card Number _____		Exp. Date _____		
Name as it appears on the card (please print) _____				
Signature (required for all charges) _____				

THREE WAYS TO DONATE: **BY MAIL** **ONLINE** **BY PHONE**
CHECK OR CREDIT CARD WWW.WCMFA.ORG/DONATE CALL 301-739-5727