



DONATION FORM

Please complete all fields and include this form with your mailed-in donation. A receipt will be sent to you for your tax records.

Name:

Address:

City, State, Zip/Postal Code:

Country:

Phone:

E-mail:

Upon receipt of your donation, Sowers Fund will connect you to a specific beneficiary. As a donor you will receive a photo of the individual along with their story on the venture they are pursuing.

At times, multiple contributions will be combined to support a business start-up or vocational training.

Contact by email only.

I have donated before.

Yes, I would like information about who my contribution is supporting.

No, I would just like to give without any further information.

Please mail completed form and cheque to:

Sowers Fund Inc., 507 Orange Street, Newark, NJ 0710

Thank you for your support and contribution.