

DONATION FORM

NAME: (Individual or Organization)			
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE NUMBER:			
EMAIL ADDRESS:			
THIS CONTRIBUTION IS MAD	E IN MEMORY OF:		
PLEASE DIRECT MY GIFT TO	ONE OF THE FOLL	OWING:	
General Scholarship Fund			
Campus			
Program			
Please Use My Gift Where I	It Is Needed Most		
donation amount: \$			
PLEASE MAKE CHECKS PAYA Lincoln Foundation for Ec			
PLEASE MAIL CHECKS TO:			
Lincoln Tech – LiFE Foun 14 Sylvan Way, Suite A, P ATTN: Sheri D. Leach		7054	
Please submit this form via emai	l or mail it	For any questions contact Lifescholarship@lincolnfounda	

along with check to the address provided above.

or reach out to your campus contact.