

In Memoriam Donation Form

As an expression of Love and Respect for:

I enclose a gift of remembrance to the
HAWTHORNE MEMORIAL FUND, INC.

In the amount of \$ _____

Please inform _____ **of my donation.**

(Address)

Donor:

(Address)

PLEASE NOTE: If you wish your gift to be tax deductible, the payee should be a charity of your choice. This Memorial Fund is a private foundation and is not tax exempt. Your gift will be acknowledged. Thank you.

Please return this form with your donation to:

**Hawthorne Memorial Fund
100 Hawthorne Blvd.
Leesburg, FL 34748**