



Printable

## MEMORIAL/HONORARIUM CONTRIBUTIONS FORM

DATE \_\_\_\_\_

<b>Contribution IN MEMORY OF</b>  _____	\$
<i>please print</i>	
<b>Contribution IN HONOR OF</b>  _____	\$
<i>please print</i>	

**DONORS ... please legibly print your information below in BLACK ink.**

Name:	
Address:	
City, State, Zip:	
Daytime Phone:	Email:

Please mail a personal check or money order made payable to LCCS along with this form to Lexington County Choral Society, Attn. Rose Bass, Treasurer, P.O. Box 1179, Lexington, SC 29071-1179.

*All contributions made to LCCS are tax deductible. LCCS is a 501(c)3 organization.*

Thank you for your support of our organization.