

# CROCKER art museum

Thank you for your gift to the Crocker Art Museum!

Name(s) \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone \_\_\_\_\_ Work phone \_\_\_\_\_  
Email address \_\_\_\_\_

**Please apply my gift of \$ \_\_\_\_\_ to the following:**

Annual Fund

Capital Campaign

Pledge Payment

New gift

Tribute Gift

In honor of \_\_\_\_\_

In memory of \_\_\_\_\_

Please send acknowledgement of my tribute gift to:

Name \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Other: \_\_\_\_\_

I prefer my gift to be anonymous

**Check to Crocker Art Museum is enclosed**

**Credit card**

American Express

Discover

MasterCard

Visa

Credit card number \_\_\_\_\_

Expiration date \_\_\_\_\_ Security code \_\_\_\_\_

Signature \_\_\_\_\_

OFFICE USE ONLY

DATE ACCEPTED: \_\_\_\_\_ ACCEPTED BY (INITIALS): \_\_\_\_\_