

# **Monthly Giving Program Authorization**

Name	·																<del> </del>					
Addre	ss:																					
								Street														
				(	City						State				Zip Cod	le						
Email	Email:											_ Phone:										
Mont	hly Gi	iving	Level	s - Eve	en a sı	mall gi	ft can r	make a	a big d	ifferen	ce!											
	\$10.0	0/mon	th (\$12	20/vea	r) (min	imum)																
	Ionthly Giving Levels - Even a small gift can make \$10.00/month (\$120/year) (minimum) \$25.00/month (\$300/year) *Memory Wall \$50.00/month (600/year) \$125.00/month (\$1,500/year) \$ Other aredit Card: Visa MasterCard ard # ignature: authorize Richard Lambert Foundation to effect payment in the account listed above until I further notify Richard Lambert listed ones customized and designated "leaf" to discuss vary with gift.										All	ransa	ctions	will po	st to v	our ac	count					
	\$50.00/month (600/year)															n mont						
	_		,	• ,																		
						c	ther															
Credit	Card:		_ Visa		Ma	asterC	ard		_Disco	ver		AMEX										
Card #	<b>#</b>										Exp. I	Date			CVC#							
Signat	ture:											D	ate:									
_																						
ine acc	Journ IIS	steu ab	ove uni	II I IUIU	ier riou	iy Kicii	aru Lari	iibeit F	ouridati	OH.												
For all loved	month	nly givi : <b>uston</b>	nized a																			
Smal	l Leaf	- (\$2	5 - \$4	5 level	l) Plea	se indi	cate h	ow you	u woul	d like v	our in	scriptio	on to a	ppear	on the	grid b	elow.					
																J						
								SAN	IPLE													
	I	N		L	О	٧	I	N	G		М	Е	М	0	R	Υ						
								0	F													
	R	I	С	Н	Α	R	D		J		L	Α	М	В	Е	R	Т					
							YO	JR INS	CRIPT	ION												



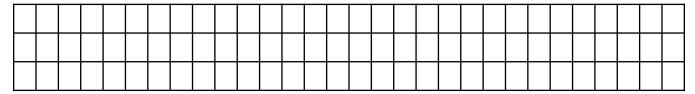
# **Monthly Giving Program Authorization**

**Medium Leaf -** (\$50 - \$70 level) Please indicate how you would like your inscription to appear on the grid below. Print with one letter or symbol and one space per box. Up to 90 characters, including spaces.

#### **SAMPLE**

			I	N		М	E	М	0	R	Υ		0	F		0	U	R		S	0	Ν				
				R	I	C	Ι	Α	R	D		J		L	Α	М	В	Е	R	Т						
w	Е	L	0	٧	Е		Α	N	D		М	I	S	S		Υ	0	U		D	Е	Α	R	L	Υ	

## YOUR INSCRIPTION

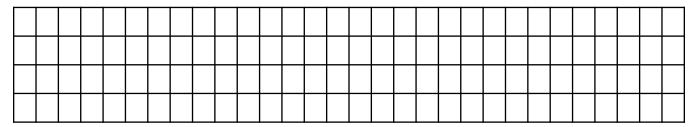


**Large Leaf -** (\$75+ level) Please indicate how you would like your inscription to appear on the grid below. Print with one letter or symbol and one space per box. Up to 120 characters, including spaces.

#### **SAMPLE**

			I	N		М	Е	М	0	R	Υ		0	F		0	U	R		s	0	N				
				R	I	С	Н	Α	R	D		J		L	Α	М	В	Е	R	Т						
W	Е	L	0	٧	Е		Α	N	D		М	I	S	S		Υ	0	U		D	Е	Α	R	L	Υ	
				L	0	٧	E	,		М	0	М		Α	N	D		Р	Α							

## YOUR INSCRIPTION



For Questions or To Give Online:

Susan Chavez: 720-408-8417 susan@richardlambertfoundation.org www.richardlambertfoundation.org/angel-donormonthly-giving Remit by mail or fax to:

Richard Lambert Foundation 457 S. 4th Ave., Brighton, CO 80601 720-370-9910



Richard Lambert Foundation is a non-profit 501(c)3 organization. EIN # 46-3655727