

Permission to share my generosity via IFYE's annual donor list.					
	Yes, IFYE can share my name on the annual donor list.				
	No, I prefer my donation/name remain anonymous.				

2024 IFYE Annual Giving Campaign Postal DONATION FORM

NOTE: If you wish to pay by credit card, please go to https://ifyeusa.org and click on "Ways to Give"

Please check the appropriate box(es) for the support you wish to provide to the IFYE Association. Mail the form and completed action(s) that you have selected and check(s) to: IFYE Association of the USA, Inc., c/o Roger Sherer, Associate Treasurer, PO Box 452, Bluffton, IN 46714-0052

(If questions, please contact Roger at rsherer@ifyeusa.org or call at 260-273-8188)

PLEASE COMPL	ETE:									
NAME(s) EMAIL										
ADDRESS			CITY			STATE	ZIP			
HOME PHONE				CELL	PHONE					
RELATIONSHIP to IFYE										
Our combined Mark Zeug Match & Annual Giving Campaign Goal for 2024 is \$100,000!										
I wish to support	with the follow	ving donati	on:				3	Our combined goal is		
\$50	\$100	\$250	\$500	\$1,000	\$2,500	Other Am	ount \$	\$100,000!		
						payable to	o "IFYE Assoc	iation of the USA".		
I am sending QCD (Qualified Charitable Distribution) from my IRA. (Consult your Financial Advisor) Please send me (by email) access information to the IFYE website "Member Login Area".										
Enclose	My email addrest d is \$20 for the remove me/us for the second contract of the second contra	printing and	l postal ma	iling of the IF				published in 2025.		

THANK YOU FOR YOUR SUPPORT of IFYE

11/21/2024

The IFYE Association of the USA, Inc. shall make its services, facilities, and programs available to all persons regardless of race, color, creed, gender, gender variance, age, disability, marital status, sexual orientation, or national origin, and the Association shall not in any way discriminate against any person on the basis of race, color, creed, gender, gender variance, age, disability, marital status, sexual orientation, or national origin.

https://ifyeusa.org/