



Western Norman Community Fund

Enclosed is my tax-deductible gift of:

_____ \$5,000 _____ \$2,500 _____ \$1,000 _____ \$500 _____ \$250
_____ \$100 _____ \$50 _____ \$25 Other \$ _____

Name _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

Please make checks payable to NMF – Western Norman Community Fund

**Mail donation and this form to:
Western Norman Community Fund
PO Box 211
Halstad, MN 56548**

OR make a gift online at www.nwmf.org, Give Now and then look for
Western Norman Community Fund or use the QR code at the bottom of the page.

This donation is to be recognized as: _____ Anonymous _____ From the donor noted above

_____ In honor of _____

_____ In memory of _____

