

# I am proud to support excellence in education in the Minnetonka Public Schools!

Enclosed is my tax-deductible contribution to support: (please choose one)

Annual Campaign (Teacher Grant program)  Endowment Fund

Donation Amount:  \$50  \$100  \$200  Other \$ \_\_\_\_\_

Name \_\_\_\_\_

Check Enclosed *(payable to Minnetonka Public Schools Foundation)*

Address \_\_\_\_\_

Please charge my gift:  VISA  MasterCard

City \_\_\_\_\_

\$ Amount \_\_\_\_\_

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

Acct # \_\_\_\_\_

Phone \_\_\_\_\_

Signature \_\_\_\_\_

Email \_\_\_\_\_

Expires \_\_\_\_\_

My employer will match my gift. I will complete a matching gift form from my employer.  I prefer for my gift to remain anonymous.

Employer Name: \_\_\_\_\_