



Business/Individual Name for Recognition: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I wish to support the SCC Foundation with a gift of \$ _____

Cash/Check payable to SCC Foundation

Stock/Grain/Other _____

Credit Card

Pledge to be paid by _____

_____ Exp. _____ CID # _____

Signature: _____ Printed Name: _____

I wish to remain anonymous.

Date