RON BROWN
SCHOLAR PROGRAM

Date:

RE: GIFT to RON BROWN SCHOLAR FUND

- ☐ Check (made payable to Ron Brown Scholar Fund)
- ☐ Stocks, Mutual Funds and Bonds (please contact us at 434.964.1588 for more information)

Please accept this letter as my **new gift, recurring payment** or a **pledge installment.**
CIRCLE ONE

AMOUNT
Gift Amount: $_____ ☐ One-time ☐ Monthly ☐ Annual

Pledge Installment: $_____ over ___ months/years for the total amount of $_____

This gift is ☐ In memory of or ☐ In honor of _____

Please indicate your name as you would like it to appear in the Annual Fund Report or if you wish to remain anonymous:

☐ Name: _____
☐ I wish to remain anonymous

Ron Brown Scholar Program
2410 Old Ivy Road, Suite 200
Charlottesville, Virginia 22903

Tax ID #: 54-1832314

Thank you for your assistance in completing this gift to the Ron Brown Scholar Fund.

Very truly yours,
Donor's Signature

Name:
Address:
Donor Phone #:
Email:

cc: giving@ronbrownscholar.org