



ASABE Foundation

Yes! I want to support the ASABE Foundation with my tax-deductible gift in the amount of \$ _____ .
I prefer that my gift be applied to:

____ KEYS ____ scholarships ____ student competitions ____ awards

____ where most needed ____ fund of choice: _____

(For listing, go to asabe.org/foundation, click on Foundation Funds.)

Name: _____ Check Enclosed

Street Address: _____ Please charge my card: _____

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Phone: _____ Member # : _____ Security Code: _____

Signature: _____ Date: _____

Print and mail to: *ASABE Foundation, 2950 Niles Road, St. Joseph MI 49085*

OR Download, fill, and email to: Foundation@asabe.org

For information about pledges, please contact us at Foundation.org or 269.932.7006.