

Your Community Foundation

Match Month - Donation Form



Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

Mark box to learn more about legacy giving ☐

Mark box for this gift to remain anonymous ☐

Please indicate below the fund(s) to credit:

\$	YCF General Goal = \$10,000	Help us on our journey to sustainability! All donations are invested in our operating fund, which helps us continue to run and grow the foundation. Our grant funding for staff support is coming to an end, and with donor support, we're working toward becoming fully self-sustaining in the coming years.
\$	YCF Public Health Goal = \$10,000	Supports YCF's annual Community Grant Cycle, which awards \$15,000–\$25,000 each year to multiple nonprofits addressing local needs. Since 2012, this program has provided more than \$122,000 to projects that enhance the quality of life in Allen County.

\$	Allen Community College Scholarship Fund	Provides support to ACC's scholarship program.
\$	Allen County Hospital Uniting for Excellence Fund	Supports purchases of medical equipment for the hospital.
\$	Coach Neil Crane Allen Community College Fund	Supports renaming the gym floor in honor of Coach Neil Crane and future maintenance or renovations to the gym.
\$	First Presbyterian Church Fund	Supports operations and activities of the First Presbyterian Church.
\$	Friends of the Allen County Parks & Trails Fund	Supports the maintenance and improvement of Allen County's parks and trails for community enjoyment.
\$	Gary & Barbara McIntosh Historical Education Fund	Funds upkeep of multiple historical education sites in Kansas.
\$	Hope Unlimited Fund	Supports operations and activities of Hope Unlimited.
\$	Iola Public Library Fund	Supports operations and activities of the Iola Public Library.
\$	Iola Senior Citizens, Inc. Fund	Supports operations and activities of the Iola Senior Citizens.
\$	Masterson Family Youth Recreation Fund	Supports youth in Iola through local athletic, artistic, and educational activities.
\$	Raymond C. McIntosh Memorial Fund for ACARF	Supports operations and activities of ACARF.
\$	Springer Family Fund for Community Vitality	Supports projects addressing the health and wellness of the community.
\$	The Growing Place Fund	Supports operations and activities of The Growing Place.

TOTAL DONATION: \$ _____

Payment Method: ☐ Cash ☐ Check # _____