



## Honor Board

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Donation Amount:** \_\_\_\_\_

Please mail a letter on my behalf to: \_\_\_\_\_

\_\_\_\_\_

List me as a donor in the Community Foundation Annual Report (yes or no) \_\_\_\_\_

**Please make checks payable to the:  
Kenmure Fights Cancer Fund**

**Dedication as you would like it to appear:**

**Please circle one: In Honor of or In Memory or or In Support of**

**Name(s):** \_\_\_\_\_

**Any Special Note:** \_\_\_\_\_

**Donated By:** \_\_\_\_\_

Mail to: Sally Hale, 703 Overlook Dr., Flat Rock NC 28731.

Questions? Contact Sally at 697-3292 or [willymax4@gmail.com](mailto:willymax4@gmail.com)

Your gift is fully tax deductible.  
The Community Foundation will send a tax acknowledgment letter.