



Memorial/Honorarium Form

In Honor of _____ In Memory of _____

Donor Information (please print or type)

Name	
Street Address	
City	
State	
ZIP Code	
Telephone (home)	
E-Mail	

Acknowledgement Sent to:

Name	
Street address	
City	
State	
ZIP Code	
Telephone (home)	
E-Mail	

Donation Information

Donation Amount \$ _____

I (we) plan to make this contribution in the form of:

___ cash ___ check ___ Online

Gift will be matched by _____ (company/family/foundation).

___ form enclosed ___ form will be forwarded

___ I (we) wish to have our gift remain anonymous.

Please make checks, corporate matches, or other gifts payable to:

Meals on Wheels of Loveland and Berthoud
437 Garfield Avenue
Loveland, CO 80537