



Ohio Endowment

DONATION FORM

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Directed to one of the following:

___ The Community Foundation of Lorain County

___ FCCLA State Programing, Leadership Programs _____
State specific program to support

___ Increasing Scholarship Base

Name _____

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Chapter Name _____

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Address _____

Name of Contact _____

Email of Contact _____

Phone of Contact _____

Send to: Ohio FCCLA Endowment
25 S Front St. #611
Columbus, Ohio 43215

25 S. Front Street #611
Columbus, Ohio 43215

Office: 614.466.5718
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