



Yes! I will support the development of women leaders by joining 100 Who Lead!

Donor Information

- Business Individual

Name: _____

Business Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

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Method of payment

- Annual contribution of \$400 enclosed. (Make checks payable to Initiative Foundation)
- Please process my annual contribution of \$400 using the credit card information below.

I pledge \$400 to be applied in four equal payments on: March 15, June 15, September 15 and December 15

- Please send me invoice reminders.
- Please process my quarterly pledge payments using the credit card information below.

Visa/Mastercard Authorization

Card Number: _____
Exp Date: _____ Security Code: _____
Billing Address: _____
City/State/Zip: _____

The Women's Leadership Fund accelerates the number, effectiveness, and impact of women in organizational leadership roles in Central Minnesota.
www.womensleadershipfund.org

We are a Partner Fund of the Initiative Foundation. Please mail this form to:

Initiative Foundation
Attn: Women's Leadership Fund
405 First St SE
Little Falls, MN 56345



Or send via email to welead@ifound.org. Thank you!

As a 501(c)(3) nonprofit organization, your gift is tax deductible to the extent allowed by law. No goods or services will be exchanged for your gift.