



DONATION FORM

*(The Kerosene Lamp Foundation is recognized as a 501(c) 3 organization)
(All contributions to KLF are tax deductible)*

Today's Date (month/day/year): _____ / _____ / _____

Title (circle one): Mr. Mrs. Ms.

Last Name: _____

First Name: _____

Middle Initial: _____

Mailing Address: _____

E-mail Address: _____

Daytime phone: (_____) _____

Evening phone (_____) _____

Total amount of your contribution: \$ _____

Donation method (circle one): Check Money Order

Please make your check or money order payable to **The Kerosene Lamp Foundation**
For more information visit our website at www.kerosenelampfoundation.org