



**OKLAHOMA
BAR FOUNDATION**
Law. Education. Justice.

P.O. Box 53036
OKC, OK 73152

Phone: 405.416.7070
Fax: 405.416.7089
www.okbarfoundation.org

Contribution Form

Name: Mr. /Mrs. /Ms. _____ Company: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Preferred Email: ☐ Personal ☐ Work Email Address: _____

Tax receipt will be emailed to address listed above

Birthday: _____ Cell Phone: _____ Home Phone: _____ Work Phone: _____
Month/Day/Year

What inspires you to give? _____

DIRECT GIVING

\$50 _____ \$75 _____ \$100 _____ \$250 _____ \$500 _____ Other \$ _____

FELLOWS PROGRAMS

Join a giving program!

Fellows Program:

_____ **\$100/year** *Sustaining Fellow*
_____ **\$200/year** *Contributing Fellow*
_____ **\$300/year** *Benefactor Fellow*
_____ **\$500/year** *Leadership Fellow*
_____ **\$1,000/year** *Governing Fellow*

Fellows Program – individuals

Community Fellows Program:

_____ **\$1,000/year** *Community Partner*
_____ **\$2,500/year** *Community Supporter*
_____ **\$5,000/year** *Community Champion*
_____ **\$7,500/year** *Community Pillar*
_____ **\$10,000/year** *Community Cornerstone*

Community Fellow - law firms, companies, organizations

BILLING OPTIONS

_____ Cash/Check Enclosed

_____ Bill me _____ Yearly _____ Monthly _____ Quarterly

_____ Credit Card _____ / _____ / _____ / _____ Exp. Date ____ / ____ Security Code: ____

Signature: _____

Thank you for your contribution. Your gift is tax deductible.