



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

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**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**

\$ 5 0 \_    \$ 7 5 \_    \$ 1 0 0 \_    \$ 2 5 0 \_    \$ 5 0 0 \_    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**

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

☐ Cash/Check Enclosed

Bill me    ☐ Yearly    ☐ Monthly    ☐ Quarterly

Credit Card    ☐ I ☐ I ☐ I \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Tha

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