



# Donation Form

Organization to receive donation:

OR

☐ Donations are being made to multiple organizations (see back)

Dedication:

In Memory of: \_\_\_\_\_

In Honor of: \_\_\_\_\_

Donation Amount Total: \$ \_\_\_\_\_

## DONOR INFORMATION:

☐ I would like to make this donation anonymously.

Business/Organization/Group: \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

☐ Please add me to your mailing list.

☐ Please add me to your email list.

## PAYMENT INFORMATION:

☐ Cash (Pony Express Verified by: \_\_\_\_\_)

☐ Check No.: \_\_\_\_\_ Check Date: \_\_\_\_\_

(Made Payable to: **Give BIG Gothenburg**)

☐ Credit Card: \_\_\_\_\_ Exp: \_\_\_\_\_ Code: \_\_\_\_\_



Mail to: Pony Express Community Foundation, c/o Will Rahjes  
PO Box 81, Gothenburg, NE 69138

See back page for a complete listing of participating causes



**Donor Name:** \_\_\_\_\_ **Total:** \$ \_\_\_\_\_

Boy Scouts	\$ _____	Gothenburg Public Schools Foundation	\$ _____
Camp Comeca	\$ _____	Gothenburg Rotary Club	\$ _____
DC 4-H	\$ _____	Gothenburg Senior Center	\$ _____
DC Ag Society	\$ _____	Gothenburg Shares/ Food Baskets	\$ _____
DC Cancer Care	\$ _____	Gothenburg Teammates	\$ _____
DC Family Partners	\$ _____	Gothenburg United Fund	\$ _____
DC Historical Society	\$ _____	Gothenburg Volunteer Fire Department	\$ _____
DC Parent Child Center	\$ _____	L2 for Kids Gothenburg	\$ _____
DC Sheriff's Office Drone Team	\$ _____	Livin' Out Loud	\$ _____
Dawson/Gosper County CASA	\$ _____	Paw Prints	\$ _____
Gothenburg Backpack Program	\$ _____	Pony Express Foundation	\$ _____
Gothenburg Baseball Inc.	\$ _____	Pony Express Rider Sculpture	\$ _____
Gothenburg Fireworks Fund	\$ _____	Prairie Care Foundation	\$ _____
Gothenburg Food Pantry	\$ _____	THE BURG	\$ _____
Gothenburg Health Foundation	\$ _____	The Giving Closet	\$ _____
Gothenburg Historical Museum	\$ _____	The Sun Theatre	\$ _____
Gothenburg Impact Center	\$ _____	Wild Horse Foundation	\$ _____
		YMCA at Gothenburg Health	\$ _____