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Enclosed is my gift of: \$50 \$100 \$250 \$500 \$1,000 Other \$_____

Please send me information about how to make a gift a stock

My employer will match my gift (please enclose your employer’s matching gift form)

Payment Information

My check is enclosed made payable to “Fleisher Art Memorial”

Please charge my credit card: Visa MasterCard American Express

Number	Exp. Date	Sec. Code
Name on Card (if different from below)		Signature

Contact Information

Name(s) as you wish it to appear in print I wish to remain anonymous

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Please return this form to Fleisher Art Memorial, Development Office, 719 Catharine Street, Philadelphia, PA 19147.
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