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The William Alanson White Institute
Development Office
20 West 74th Street
New York, New York 10023

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Country: _____

E-mail: _____

Phone: _____

Some companies will match your charitable contribution. May we contact your employer to arrange for a matching contribution?

Company Name: _____

Company Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Payment: Checks should be made out to The White Institute

Amount: _____

Card Type: [] Visa [] MasterCard [] Amex [] Check #: _____

Card Number: _____ Exp Date: _____

Printed Name: _____

Signature: _____