

APPLICATION FOR MELVIN JONES FELLOWSHIP

Allow 6-8 weeks for recognition to arrive

Phone: (630) 571-5466
Fax: (630) 571-5735

RECIPIENT

Is this a personal donation from recipient? Yes No

Check here if the recipient is to be named later.

Individual Name _____
Print clearly and exactly as name should appear on plaque

Address _____
Number and street name; apartment number

City, State, Province, Postal Code, Country

Is recipient a Lion? Yes No Club Name _____

Club No. _____ Member No. _____ Dist. No. _____

Check here if the recipient is deceased.

Print name, complete address, and relationship to deceased, of individual to whom plaque is to be presented.--required for preparing accompanying letter.

Name _____
Print clearly

Address _____
Number and street name; apartment number

City, State, Province, Postal Code, Country

PROGRESSIVE

Distinctive Melvin Jones Fellowship Progressive lapel pins of from one to ten diamonds, sapphires or rubies are presented to recipients for each donation of US\$1,000 beyond the initial fellowship.

Check here if this donation is for Progressive recognition.

If recipient has received MJF recognition under another name, enter that name.

SPECIAL INSTRUCTIONS

DONOR

Complete ONLY if different from recipient. If more than a single donor, please provide list of donors and amounts on separate page.

Name of Donor _____

Address _____
Number and street name; apartment number

City, State, Province, Postal Code, Country

This donation is from (check one): Individual Club
District M.D. Other

Is donor a Lion? yes no

If yes, provide Lionistic affiliation information below

Club Name _____

Club No. _____

District No. _____

DONATION

To find the amount of local funds required for exchange to US dollars for intended donation, use the association's official current monthly exchange rate shown on club statement.

- Please check one: Cheque/bank draft/money order payable to LCIF for US\$1,000 drawn upon a US bank.
 Bank receipt of deposit or wire transfer for US\$1,000 or equivalent.
 Installment - Minimum \$100 each - must be completed in 5 years.
 Completion of an installment Melvin Jones Fellowship.
 Use MJF funds previously donated towards unnamed recipient.

Charge my: Visa Mastercard American Express in the amount of US\$ _____ Card No. _____

Signature of cardholder _____ Exp. date _____

(Recognition is not sent until contributions are received in Oak Brook.)

SHIPPING INSTRUCTIONS

In the space below print name, complete address, and daytime telephone number of individual to whom plaque, lapel pin, and letter are to be sent for presentation to the recipient. CANNOT BE SENT TO A P.O. BOX.

Name _____ Daytime Phone No. _____ Fax No. _____

Street Address _____

City, State, Province, Postal Code, Country



CONTRIBUTION FORM OTHER THAN FELLOWSHIPS

300 22nd Street
Oak Brook, IL 60523-8842

Phone: (630) 571-5466
Fax: (630) 571-5735

DONOR

This donation is from -- Individual Club District M.D. Other
Please type or print to ensure accuracy.

• Club name _____ Club No. _____ District No. _____

• Individual name _____ Check if non-Lion

Address _____
Number and Street City State/Province Zip/Postal Code Country

DONATION

To find the amount of local funds required for exchange to US dollars for intended donation, use the association's official current monthly exchange rate shown on club statement. Cheques in US\$ must be drawn on U.S. banks.

Please check one: cheque or bank draft
 bank deposit receipt
 wire transfer (SWIFT) receipt

Amount in US\$ _____ for local funds of _____

Charge my: Visa Mastercard American Express in the amount of US\$ _____ Card No. _____

Signature of cardholder _____ Exp. date _____
(Recognition is not sent until contributions are received in Oak Brook.)

DONATION-RECOGNITION

Please check appropriate boxes. Allow 6-8 weeks for recognition to arrive.

Club Plaque (US\$1,000)
 Contributing Members (US\$20) No. Members _____ Amt./Mbr. _____ Total Amt. US\$ _____
 Special Event-Birthday, Graduation, Anniversary, etc. Describe _____ US\$ Amt. _____

Honor roll

certificate (US\$100)

Name _____

Corporate Plaque

(US\$1,000 or more)

Enter amount US\$ _____
Corporate name as it should appear on plaque. _____

Name, title and mailing address of chief executive officer.
We must have this information for corporate recognition letter.

Name _____

Number and Street _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

SHIPPING INSTRUCTIONS

Recognition cannot be sent to a P.O. box

Name _____

Number and Street _____

City _____ State/Province _____ Zip/Postal Code _____

LCIF-42 40M 6-97

Memorial Card

Donation in memory of:

Name of Deceased _____

Enter Amount US\$ _____

Send memorial card to:

Name _____

Address _____
Number and Street

City _____ State/Province _____ Zip/Postal Code _____

Country _____ Relationship to deceased _____

Major Gifts

(check one)

- US \$10,000 Patron's Group
- US \$25,000 Silver League
- US \$50,000 Golden Guild
- US \$100,000 Chairman's Circle
- Heritage Club-Bequests

Amount US\$ _____

SPECIAL INSTRUCTIONS

