



**KEVIN L ALLEN MEMORIAL SCHOLARSHIP FUND  
DONATION FORM**

**YES**, I want to help make a students' dreams come true. Please accept my contribution to this fund to continue the growth of automotive technologies.

NAME: \_\_\_\_\_

AGENCY/COMPANY (if applicable) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL FOR DONATION RECEIPT: \_\_\_\_\_

AMOUNT OF CONTRIBUTION: \_\_\_\_\_

PLEASE MAKE YOU CHECK PAYABLE TO: KEVIN L ALLEN MEMORIAL SCHOLARSHIP FUND

Your donation is tax deductible to the extent allowable by law. Upon receipt of you donation, the Kevin L Allen Memorial Scholarship Fund will issue you a letter of acknowledgement for your contribution.

Please mail this form with your check/money order to:

Kevin L. Allen Memorial Scholarship Fund  
c/o Gail Allen  
313 Bradford Way  
Peachtree City, GA 30269

*THANK YOU For Your Support!*