

CFLEADS INVESTOR CONTRIBUTION FORM

Thank you for helping community foundations strengthen their community leadership potential by supporting CFLeads! To make a pledge or a contribution, please complete all fields below and return to [Keisha Walker](#).

CONTACT INFORMATION

Organization _____

Address _____

City/State/Zip _____

Phone _____

Contact Name _____

Contact Email _____

INVESTMENT AMOUNT

Enclosed is our 2024 investment contribution of \$ _____

We are also including our 2025 investment contribution of \$ _____

We will make a contribution of \$ _____ by [date] _____

PAYMENT INFORMATION

Check – Please mail to CFLeads, PO Box 509, Accord, MA 02018

Credit Card* – [Click here to donate online](#) *please consider covering the credit card processing fee

ACH or Wire Transfer – Contact [Keisha Walker](#) for CFLeads' ACH/Wire information

Please send an invoice for the amount indicated above to this address: _____

Send us the investment contribution invoice yearly on the following date _____

Other – please provide details: _____

Signature _____

Title _____

Date _____

CFLeads

Community Foundations
Leading Change

Thank you for your support!

Mailing Address:
P.O. Box 509, Accord, MA 02018

www.cfleads.org