



AHIF ENDOWMENT FORM



YES! I want to support AHIF's endowment program.

CONTRIBUTION CATEGORIES

The name(s) for my endowment fund(s) _____.

- \$5,000
 \$10,000
 \$15,000
 \$20,000
 \$25,000
 \$50,000
 \$75,000
 \$100,000
 _____ Other

PLEASE ALLOCATE MY ENDOWMENT INCOME TO THE FOLLOWING:

- Administrative staff and interns
 Programs (seminars, conferences, forums, lectures)
 Publications
 General operating expenses

Enclosed is my check payable to AHIF in the amount of \$ _____.

PLEDGES

I am pleased to pledge \$ _____ payable over _____ years.

MY METHOD OF PAYMENT TO AHIF:

- Check
 Visa
 MasterCard
 American Express

Credit Card No: _____ Exp. Date _____

Signature: _____

Name: _____

Address: _____

City: _____ State _____ Zip _____

Office Phone: _____ Fax: _____ Home: _____

Please make your check payable to AHIF and mail it in the enclosed envelope to:
American Hellenic Institute Foundation
1220 16th St., NW, Washington, DC 20036
For information call 202-785-8430 or check our Web site at www.ahiworl.org
The AHIF is a 501(c)(3) non-profit, tax-exempt educational and research organization.
All contributions are tax-deductible as charitable contributions.