





Donati	on is from a	hapter	☐ Group		ndividual
PLEASE	PRINT LEGIBLY	-			
Name ((Treasurer's or Individual's):			Chapter Letters
Mailing	g address		City		
State _	Zip		Chapte	er City _	
Email _			Phone		Date
If you v		(IHO) or in		someone, (ount for each. circle IHO or IMO and write in the name. vide the name/mailing address for the honoree/family.
	Colorado P.E.O. Charitable Corporation \$IHO/IMO				
	Chapter House General Fund	\$	IHO	/IMO	
	Share the Care Fund	\$	IHO	/IMO	
	Endowment Fund Endowment Funds are restricted s less than \$10,000 will be credit	d donation	ns, the minimum an		C can accept for the Endowment Fund is \$10,000.
	Marguerite Fund General Fund	\$	IH0	0/IMO_	
	Shower Fund	\$	IHO	O/IMO_	
Please	nclosed \$make your check payable to the paya	to COLOI	RADO P.E.O. CH		
	Castle Rock, CO 80104-54	146			

Note: Mail International and Colorado State Educational philanthropy donations to the CO State Chapter Treasurer with a Colorado State Form. Go to www.coloradopeo.org for the correct form and mailing address.

Your Colorado P.E.O. Charitable Corporation protects, preserves, and promotes the Colorado P.E.O. Chapter House and the Colorado P.E.O. Marguerite Fund