

HC  EXCELL

The Education Foundation

Yes! I want to support HC*EXCELL!

\$5,000 \$1,000 \$500 \$100 \$50 \$ _____

- I am enclosing a check for the full amount (make check payable to HC*EXCELL)
- I am enclosing a partial payment of \$ _____. Please bill me for the remaining amount.
- Please bill me for the full amount.

Name

Address

City

State

Zip

Phone:

email:

For program recognition, please list my/our name as:

Please do not list my/our name.

*HC*EXCELL is a 501(c)3 organization, and your gift is tax deductible.*

*HC*EXCELL • P.O. Box 2156 • Morristown, TN 37816-2156*