

Donor Direction Card	Date:
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Postal Code:Pr	none:
Email Address:	
Signature:	
Please accept my gift of \$	
	sorEssex Community Foundation)
	ft to the following fund permanent capital
☐ Community Imp	pact Fund
Operating Endo	owment Fund
Area of greates	t need in our community
	Fund
(Please contact the WECF of	office for information on our funds)
The income from my gift will be projects that benefit the citizer	e distributed annually to charitable as of the WindsorEssex community.
This gift and all my future gift same manner as indicated,	rs are to be directed in the unless I direct otherwise.
Confidentiality and privacy of publishes a list of supporters would like to remain anonyn	are important to us. The Foundatior as a form of appreciation. If you nous please check the box.
Please send me more inforr	mation regarding the following:
☐ Donating Secu	Foundation in my Estate Planning urities
<ul><li>☐ A gift of Life Ins</li><li>☐ Giving opport</li></ul>	
☐ Having a spea WindsorEssex (	
Please return your donation	and this donor direction card to:

Tel: 519-255-6572 Fax: 519-255-6936 Email: info@wecf.ca **www.wecf.ca** 

WindsorEssex Community Foundation 3200 Deziel Drive, Suite 511, Windsor, ON N8W 5K8