

CONTRIBUTIONS



Northern Illinois American Muslim Alliance

Individual Donor Name _____

Address _____ City _____ State _____ ZIP _____

Home Phone _____ Business Phone _____ Email _____

Mandatory Information:

Employer _____ Occupation _____ Retired

I am Contributing

Platinum \$1000 and above

Silver \$250 to \$ 500

Gold \$500 to \$1000

Any other amount \$ _____

I am paying by check payable to NIAMA Northern Illinois American Muslim Alliance.

I am paying by cash. We are required to give you a receipt for a cash contribution over \$100 or more.

Amount \$

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