

A Tribute to Someone Special in My Life

I would like to

_____ Honor _____ Memorialize

NAME _____

Person being honored/memorialized

OCCASION _____

Anniversary, birthday, in memory of, etc.

Please acknowledge my gift to:

Name _____

Individual, relative or friend of person named above.

Address _____

Gift amount: \$ _____

Given by _____

Person or organization making the gift

Address _____

Phone _____

Make checks payable to
AASRA Scholarship Foundation
7250 North 16th Street, Suite 302
Phoenix, AZ 85020

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