



Kit Murphy Memorial Scholarship Fund Donation Form

Donor: _____

Company Name: _____

Donation Amount \$ _____

Please make check payable to: Kit Murphy Memorial Scholarship Fund

Send this completed page with payment to:

Kit Murphy Memorial Scholarship Fund
c/o Rob Quigg
Richmond Baking
PO Box 698
Richmond, IN 47375

Please note: No goods or services were provided in *exchange for this contribution*. *The Kit Murphy Memorial Scholarship, Inc.* is an exempt organization as described in Section 501(c)(3) of the Internal Revenue Code; EIN 61-1311686.