

**USC Shoah Foundation Institute for Visual History and Education**  
Mail in donation form

\_\_\_\_\_ name

\_\_\_\_\_ address

\_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip

\_\_\_\_\_ home phone \_\_\_\_\_ business phone

\_\_\_\_\_ fax email

**donation information**

I wish to give : \$18 \_\_\_ \$35 \_\_\_ \$50 \_\_\_ \$100 \_\_\_ \$250 \_\_\_ \$500 \_\_\_ other\$ \_\_\_\_\_

\_\_\_ Mastercard

\_\_\_ Visa

Please make checks payable to **USC Shoah Foundation Institute**

\_\_\_\_\_ credit card no. \_\_\_\_\_ expiration date

\_\_\_\_\_ signature [ required for credit card donations ]

**tribute card information** [ if appropriate ]

In Honor of  In Memory of

\_\_\_\_\_ name

please notify the following person(s) of my gift :

\_\_\_\_\_ name

\_\_\_\_\_ address

\_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip

\_\_\_\_\_ sign the tribute card from

\_\_\_\_\_ tribute card message (15 words or less)

please mail your generous contribution to:

USC Shoah Foundation Institute for  
Visual History and Education  
Leavey Library  
650 W. 35th Street, Suite 114  
Los Angeles, CA 90089-2571

**thank you for your generosity**  
contributions to the Shoah Foundation  
are tax- deductible to the extent  
permissible by law.