



DONATION FORM

Please send your donation and this form to:

Amador Hotel Foundation, Inc.

PO Box 1268

Las Cruces, NM 88004

Please indicate the amount of your contribution.

___ \$25.00	Juanita	___ \$250	Amparo
___ \$50.00	Mercedes	___ \$500	Esparanza
___ \$100.00	Hortensia	___ \$1,000	Margarita

Please provide the following details:

First Name _____

Last Name: _____

Company Name: _____

Street Address: _____

Address Line 2: _____

City: _____

State/Province: _____

Zip Code/Post Code: _____

Please provide your contact information:

Telephone Number: _____

Fax Number: _____

E-mail Address: _____

The Amador Hotel Foundation is a nonprofit organization recognized by the IRS.

Thank you for your tax-deductible contribution to our mission!