

Chapter Endowment Donation Form

Chapter

Region

Date

Chapter Basileus

Chapter Address

City

State

Zip

Phone

Email

Graduate Advisor's Name (Undergraduate Chapters Only)

Completed By

Position in Chapter (President, EAF Captain, etc.)

Phone

Email

Endowment Name _____

Donation Amount \$ _____

Make all checks payable to: AKA Educational Advancement Foundation (or AKA EAF or EAF)

Mail to:

5656 S. Stony Island Ave.

Chicago, Illinois 60637

Ph: (773) 947-0026

Email: akaeaf@akaeaf.net

Website: www.akaeaf.org

{{For donations by individuals to endowments, use the *Individual Endowment Donation Form*.}}

1. Send Original to EAF

2. Make copy for your records