

MDVA Fund Contribution Form

Name: _____

Organization: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Yes, I would like to make a donation to the MDVA Fund:

- Friend (up to \$100)
- Supporter (from \$101 - \$500)
- Partner (\$501 - \$1000)
- Premier (beyond \$1,000)

Enclosed is my gift of: \$ _____

Please mail your check and form to:

Maryland & Virginia Milk Producers Cooperative
Attn: MDVA Fund
1985 Isaac Newton Square West, Suite 201
Reston, Virginia 20190

Yes, please publicize my name/organization as a contributor to the MDVA Fund.

Questions? Contact Daniela Roland, Manager of Member Communications at droland@mdvamilk.com or 814-386-8000.

*Please note that donations to the MDVA Fund are NOT tax deductible.