

# PRINT & SEND DONATION FORM



Please mail your tax-deductible donation with this form, made out to:

**Foundation for Innovation in Healthy Food (FIHF)**

1407 N Bancroft Pkwy

Wilmington, DE 19806

## Donor Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

## Address Information

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

☐ Yes, I would like to receive updates from the Foundation for Innovation in Healthy Food.

## Gift Amount (please check one)

☐ \$500      ☐ \$200      ☐ \$100      ☐ \$50      ☐ Other Amount: \$ \_\_\_\_\_

## Payment Options

☐ I have enclosed a check payable to "Foundation for Innovation in Healthy Food"

☐ I would like to charge my contribution

Card Type: \_\_\_\_\_ Card Number: \_\_\_\_\_

Card Exp (MM/YYYY): \_\_\_\_\_ CVC/CVV: \_\_\_\_\_

Signature: \_\_\_\_\_

Full Name: \_\_\_\_\_

## Honor or Memorial Gifts

If you would like to make this contribution **in honor of** or **in memory of** someone, please provide the honoree's information below. If you would like us to send an acknowledgment, be sure to include their address.

**The gift is:**      ☐ **In Honor of**      ☐ **In Memory of**

Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

## Honoree Address Information (for acknowledgment):

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

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## Optional Message to Include:

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Thank you for your support! You will receive acknowledgment for tax purposes by mail within two to four weeks.

Donations made through this form support FIHF's full mission and strategic programs and are not designated to a specific project.

**The Foundation for Innovation in Healthy Food (FIHF) is a 501(c)(3) nonprofit organization. Donations are tax-deductible to the full extent of the law.**

**Tax ID Number: 88-1559386.**

Please consult your tax advisor for more details.

To donate online or learn more, visit: [www.fihf.org](http://www.fihf.org)

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