

* Donation Form *

All gifts of cash, credit card and corporate matching gifts are accepted and are deductible as prescribed by law.

\$ 100	\$ 500	□\$1,000	□ \$5,000	□ Other: \$_			
A check f	for \$		_ is enclosed payable to the "W. M. Keck Observatory."				
Credit can	rd authorizatio	n: Please charge \$_		to my 🗖 '	Visa 🗖 MasterCard 📮 American Express		
Card Numbe	er:		Expiration	n Date:	Security Code:		
Card Holder Name:Card I					illing Address Zip Code:		
Card Holder Signature:				Today's Date:			
□ My employer					will match for \$		
	•	ou have already inc ensure that your g	0		ck Observatory in your will or estate plan.		
CONTAC	T INFORM	ATION:					
Name(s):							
I/we wou	uld like this gift	t to remain anonyn	nous.				

Mailing Address:

	Street Address	City	State	Zip	
Telephone: (_)				
Email:		Email2:			

We are very curious to understand how you came to know Keck Observatory and what inspired your gift? Mahalo!

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