



## Annual Fund Donation Form

Please print this form, fill in requested information and mail to:

**August Wilson Center for African American Culture**  
**Attn: Annual Fund**  
**980 Liberty Avenue**  
**Pittsburgh, PA 15222**

Amount: \$ _____	Today's Date: _____
Name(s) as you would like it to appear in print: _____	
Address: _____	_____
City/State/Zip _____	_____
Daytime phone _____	_____
E-mail address _____	_____

- Personal check enclosed (*payable to August Wilson Center for African American Culture*)
- Please add me to The Center's e-mail list

Credit card: (circle one)

VISA                  MASTERCARD                  DISCOVER                  AMERICAN EXPRESS

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

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

Name on Card: \_\_\_\_\_

- To increase my support, I have enclosed my employer's matching gift form.  
Name of company: \_\_\_\_\_

*Questions? Contact the Development office at 412.338.8731.*