

2020 WTS Los Angeles Chapter Scholarship Sponsorship Program

Date: _		<u> </u>	
Contact Person:			Title:
Firm/A	gency:		
Addres	s:		
City:		State:	ZIP:
Teleph	one:	E-mail:	
Ple	A ANNUAL SCHOLARSHIPS ase return this form by <u>July 31, 2020</u> to To name a scholarship for your firm, ag the name here:		his year's scholarships ividual, check (1) category below and add
	High School Scholarship (\$2,500) Graduate Scholarship (\$5,000)		Undergraduate Scholarship (\$5,000)
B)	Or, donate to an established WTS LA So High School Scholarship Graduate Scholarship		ny amount. Amount: \$ Undergraduate Scholarship
MAKIN	IG YOU DONATION:		
A)	Community Foundation. Please note o The California Community Foundation is a tax-exe.	on the check "W Impt organization ui Inade to WTSF are do	please mail checks directly to California (TS-LA Scholarship Program". Inder Section 501(c)(3) of the Internal Revenue Code. The eductible as charitable donations to the extent allowed

B) **To make a secure, tax-deductible donation online**, click <u>HERE</u>. Please note in the comments which scholarship you'd like to support and how you'd like it to be named if you're sponsoring a full scholarship.

Email this completed form to Treasurer@wtsla.org and Scholarships@wtsla.org so we can acknowledge you and apply your benefits