



The Phillips Collection

CONTRIBUTION FORM

Please print and mail form to:

The Phillips Collection
Development Department
1600 21st Street NW
Washington, DC 20009

Date: ____/____/____

Name: _____
(Please Print)

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

PURPOSE OF CONTRIBUTION or PAYMENT (donation, membership, etc.):

Enclosed is a check for the amount of \$_____.

I authorize the use my credit card to make a contribution of \$_____.

Card Type:

(Circle One)

Mastercard

Visa

American Express

Name on Credit Card _____

Card Number _____

Expiration Date: _____ 3 Digit Security Code (on back of card) _____

Zip Code card is issued to: _____

Cardholders Signature: _____

The Phillips Collection is a 501(c)(3) non-profit incorporated in the District of Columbia.

Federal Tax ID # 53-0204620

For more information contact development@phillipscollection.org or 202-387-3036