



Community Foundation Grain Donation Program
CONNECTING PEOPLE WHO CARE WITH CAUSES THAT MATTER SINCE 1984.
Contributions to the **Grant County Farmers Fund** will forever
impact worthy causes in Grant County, Indiana.

Notice from the Producer

Producer Information (Please print):

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

___ I verify that this grain does not have a lien against it.

___ I verify that this grain does have a lien against it; a lien waiver is attached.

Facility Information (Please print):

Facility Name: _____

Facility Address: _____

City: _____ State: _____ Zip: _____

I agree to make a gift to the Grant County Farmers Fund of (please mark one):

___ A one-time donation of \$ _____ or the equivalent to _____ bushels from the proceed of my grain settlements will be remitted to CFGC

___ The proceeds of the sale of _____ bushels of (circle one) corn/soybeans will be remitted to CFGC

___ A gift of your choice _____

I hereby request to be included in the Community Foundation of Grant County's Grain Donation Program. I understand this form represents my written request to participate and to have a voluntary charitable donation deducted from the proceeds of my grain sales.

Signature

Date

Send a copy of this document to:
Community Foundation of Grant County
505 West Third Street
Marion, Indiana 46952

If you have any questions, contact:
Shelly Jones, Development Manager
Shelly@GiveToGrant.org
765-662-0065