



TURN AROUND FUND REQUEST FORM

For OFFICE use only

CK#: _____
Amount: _____
Date: _____

☐ **Enclosed is my Check**

Please make all checks payable to ESA Foundation

☐ **Please charge my:** ☐ VISA ☐ Master Card ☐ Discover Card

_____ + _____ Signature _____ Exp. _____

Credit Card # + security code on back of card

Please return this form to:

ESA FOUNDATION
2580 E Harmony Rd, Suite 301-11
Ft. Collins, CO 80528

If you have questions, please call (970) 223-2824.

Credit this donation to:

Individual

Donor Name: _____
ESA Member # _____
(if applicable): _____

OR

Organization (Business, ESA Chapter, Council, or Entity)

Org Name: _____
ESA Org # _____
(if applicable): _____

Send donation check(s) and receipt to:

Email: _____

Checks will be mailed to the donor's address unless listed otherwise below

Address: _____

City / State / Zip: _____

Send honorary acknowledgement to:

☐ **N/A**

\$ _____ In Memory of _____

Name: _____

\$ _____ In Honor of _____

Address: _____

Donation made to _____

The check you send to the TURN AROUND FUND must be **made payable to ESA FOUNDATION**.

Your donation to each charity must be for \$25 or more and they must be a 501c3 IRS designated/certified organization.

Please limit the number of charities per check to 10. If more than 10 charities are being designated, please include only 10 charities per check with a separate form for each check. This is needed to ensure the funds can be processed.

The EIN # for each charity must be provided (check www.guidestar.com for the EIN # and IRS Name).

NOTES:

- All Turn Around checks to St. Jude Children's Research Hospital will be given directly to Headquarters for processing.
If you use ALSAC / St. Jude materials / supplies for your event, you may NOT use the Turn Around Fund.
- A Turn Around Check cannot be issued directly to an individual or reissued to a Chapter or State Council.
- The Internal Revenue Service does not allow the Foundation to use Turn Around funds for donations to the following:
ESA Disaster Fund, State/Regional Love or Care Funds.
- All checks will be mailed to the donor / organization for distribution to the charity, unless indicated otherwise.**
- Checks that must be re-issued for whatever reason will have a service fee of \$ 25 deducted from the check.
- Checks not cashed within 120 days of the date of issue will be considered a donation to the ESA Foundation General Fund.
- The name of the Charity must be listed as the IRS has them. **If the EIN# is not provided your check will be returned.**

Amount	Name of Charity - As recognized by the IRS	Mail to Charity?	EIN #
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____
\$ _____	_____	Y <input type="checkbox"/> N <input type="checkbox"/>	_____