

MUSEUM OF FINE ARTS

St. Petersburg, Florida

Memorial & Tribute Form

Enclosed is donation of \$ _____

- Check American Express Visa/Master Card
(minimum \$25 charge for credit cards)

Card Number _____

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Signature _____

(Memorial) In memory of: _____

(Tribute) In honor of: _____

To celebrate his/her/their:

- Anniversary Birthday Bar/Bat Mitzvah Wedding
 Other Special Occasion or Accomplishment _____

Please send acknowledgement to:

Name _____

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City _____ State _____ Zip _____

Sign the acknowledgement:

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Contributions are tax deductible.
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