

Contribution Form

Donation Amount

I would like to make a one-time contribution in the following amount: \$ _____

Your Information

I am a member of RMMLF. My company is a member. Company Name: _____

Name _____

Address _____

City _____ State/Prov _____ Zip/Postal Code _____ Country _____

Add Second Name or Business Name (optional) _____

Email _____ (For occasional updates only; RMMLF does not sell or share email addresses)

RMMLF is in my will or estate plan.

Please contact me about including RMMLF in my will or estate plan.

What prompted your decision to contribute today? (optional)

Payment Information – Please choose one:

Check enclosed (Payable to RMMLF)

Bank Account draft

(Please send voided check or enter bank information below)

Routing Number _____

Account Number _____

Credit Card

Number _____

Expiration Date _____ CVV code (on back of card) _____

Signature _____



Please mail completed form and payment to:

Rocky Mountain Mineral Law Foundation
9191 Sheridan Blvd., Ste. #203
Westminster, CO 80031

Questions? Please call at 303-321-8100

Thank you for your support

www.rmmlf.org