

LORCORTA
Memorial /In Honor of Bequest

In Memory of _____

In Honor of _____

I am / We are making a gift to:

*Lorain County Retired Teachers Association
Scholarship Fund*

in the amount of _____

Donor(s) Name _____

Address _____

City _____ *State* _____ *Zip* _____

Phone Number _____

*Your memorial gift will be acknowledged in our LORCORTA
newsletter and a notification card will be sent to the family.*

Please send notification of my gift to:

Name _____

Address _____

City _____ *State* _____ *Zip* _____

*[Mail this bequest form and your donation made out to LORCORTA to Bob Slager,
LORCORTA Treasurer, 369 Hamilton Circle, Elyria, OH 44035]*