Alme Fiddlers	Yes, I would like to support the	METHOD OF PAYMENT
1973 -	Texas Old Time Fiddlers Association, a 501(c)(3) charitable organization, in its mission to promote and preserve Texas fiddling, with a <b>Tax-Deductible gift</b> of:	☐ Check (Please make payable to TOTFA)
		☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover
		Acct No:
□ \$500 □ \$250 □ \$100 □ \$50 □ Other \$		Exp Date: CVV #
Name:		Signature:
		☐ Electronic Funds Transfer* (transfers are made by the 10th each month Please include a voided check)
City:		Monthly Deduction \$ Effective Date://
State:	Postal Code:	ABA No:
Country:		Acct No:
Email Address:		My gift is eligible to be matched by my Employer (Please enclose your company's matching gift form)

Please send donations: Texas Old Time Fiddlers Association, 16276 Charlya Drive, Temple, TX 76502

1073	Yes, I would like to support the Texas Old Time Fiddlers Association, a 501(c)(3) charitable organization, in its mission to promote and preserve Texas fiddling, with a <b>Tax-Deductible gift</b> of:	METHOD OF PAYMENT
		☐ Check (Please make payable to TOTFA)
		☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover
		Acct No:
□ \$500 □ \$250 □ \$100 □ \$50 □ Other \$		Exp Date: CVV #
Name:		Signature:
Address:		☐ Electronic Funds Transfer* (transfers are made by the 10th each month Please include a voided check)
City:		Monthly Deduction \$ Effective Date://
State:	Postal Code:	ABA No:
Country:		Acct No:
Email Address:		My gift is eligible to be matched by my Employer (Please enclose your company's matching gift form)

Please send donations: Texas Old Time Fiddlers Association, 16276 Charlya Drive, Temple, TX 76502

Yes, I would like to support the	METHOD OF PAYMENT
Texas Old Time Fiddlers Association, a 501(c)(3) charitable organization, in its mission	☐ Check (Please make payable to TOTFA)
to promote and preserve Texas fiddling, with a	☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover
Tax-Deductible gift of:	Acct No:
□ \$500 □ \$250 □ \$100 □ \$50 □ Other \$	Exp Date: CVV #
Name:	Signature:
Address:	☐ Electronic Funds Transfer* (transfers are made by the 10th each month Please include a voided check)
City:	Monthly Deduction \$ Effective Date://
State: Postal Code:	ABA No:
Country:	Acct No:
Email Address:	☐ My gift is eligible to be matched by my Employer (Please enclose your company's matching gift form)