

Contribution Statement

Organization Name: _____

Assets (or total giving) as of most recent fiscal year end: \$ _____ as of ____/____/____

Contributing Organization Membership Schedule

Organizations giving at or above the following levels are eligible for Contributing Organization Membership.

Organization's Asset Range (endowed)	Organization's Total Giving (not endowed)	Annual Contribution
Under \$5,000,000	Under \$250,000	\$250
\$5,000,001 - \$10,000,000	\$250,001 - \$500,000	\$500
\$10,000,001 - \$ 25,000,000	\$500,001 - \$1,250,000	\$750
\$25,000,001 - \$ 50,000,000	\$1,250,001 - \$2,500,000	\$1,000
\$50,000,001 - \$ 100,000,000	\$2,500,001 - \$5,000,000	\$1,500
\$100,000,001 - \$ 500,000,000	\$5,000,001 - \$25,000,000	\$2,000
\$500,000,001 - \$ 1,000,000,000	\$25,000,001 - \$50,000,000	\$2,500
Above \$1,000,000,000	Above \$50,000,000	\$5,000

2010 Contribution Options

Yes! We'll support GMN as a Contributing Member Organization in 2010 with a contribution of \$ _____

We are not interested in becoming a Contributing Organization Membership at this time, but will support GMN with a contribution of \$ _____

- Our check payable to the **Grants Managers Network, Inc.** is enclosed
- We will [pay with a credit card online](#)
- We will pay our membership contribution by _____

Please return this statement, along with your payment, if paying by check, to:
Grants Managers Network, 1101 14th Street, NW, Suite 420, Washington, DC 20005



GMN Members at Your Organization

Primary Contact Person (for membership and contributions questions)

Name: _____	Mailing Address:
Title: _____	_____
Phone: _____	_____
Email: _____	_____

Additional people at your organization to include as active members (please attach additional names as needed):

Name: _____	Mailing Address (if different from Primary Contact):
Title: _____	_____
Phone: _____	_____
Email: _____	_____

Name: _____	Mailing Address (if different from Primary Contact):
Title: _____	_____
Phone: _____	_____
Email: _____	_____

Name: _____	Mailing Address (if different from Primary Contact):
Title: _____	_____
Phone: _____	_____
Email: _____	_____

Name: _____	Mailing Address (if different from Primary Contact):
Title: _____	_____
Phone: _____	_____
Email: _____	_____

Name: _____	Mailing Address (if different from Primary Contact):
Title: _____	_____
Phone: _____	_____
Email: _____	_____